

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 PRINT** Example: If typing, type over the lines
BLUE SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

ADDRESS (number and street) 50 Beale Street
17-C356
 Check if different than previously reported. (ACC)
SAN FRANCISCO CA 94105

2. **FEC IDENTIFICATION NUMBER** C00340364
3. IS THIS REPORT 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) 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 (12S)
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 23 2010 through 12 31 2010

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 Emily Glidden

Signature of Treasurer Electronically Filed by Emily Glidden Date 01 31 2011

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 Use Only								
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FEC FORM 3X
(Rev. 12/2004)

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

Write or Type Committee Name
BLUE SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

Report Covering the Period: From:

M	M
1	1

D	D
2	3

Y	Y	Y	Y
2	0	1	0

 To:

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	Y	Y	Y	Y	2	0	1	0		101456.76
Y	Y	Y	Y							
2	0	1	0							
(b) Cash on Hand at Beginning of Reporting Period	76392.92									
(c) Total Receipts (from Line 19)	9930.40	129222.49								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	86323.32	230679.25								
7. Total Disbursements (from Line 31)	8283.23	152639.16								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	78040.09	78040.09								
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

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

BLUE SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

Report Covering the Period: From:

M	M
1	1

D	D
2	3

Y	Y	Y	Y
2	0	1	0

 To:

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	1	0

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)	9150.90	87661.94
(ii) Unitemized	779.50	39860.55
(iii) TOTAL (add Lines 11(a)(i) and (ii)	9930.40	127522.49
(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)	9930.40	127522.49
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
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	1700.00
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))	9930.40	129222.49
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	9930.40	129222.49

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

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.....	8250.00	152000.00
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.....	33.23	639.16
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))..	8283.23	152639.16
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	8283.23	152639.16

DETAILED SUMMARY PAGE
of Disbursements

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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)	9930.40	127522.49
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	9930.40	127522.49
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) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 71
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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)
BLUE SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) Salim Alama	Date of Receipt MM / DD / YYYY 12 / 31 / 2010
	Mailing Address emp xx6125 50 Beale Street	Transaction ID: SA11AI.11300
	City State Zip Code San Francisco CA 94105	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	Payroll contribution per cycle \$25.00
	Name of Employer Blue Shield Occupation Employee Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 650.00	

B.	Full Name (Last, First, Middle Initial) Dennis Alva	Date of Receipt MM / DD / YYYY 12 / 31 / 2010
	Mailing Address emp xx9311 50 Beale Street	Transaction ID: SA11AI.11301
	City State Zip Code San Francisco CA 94105	Amount of Each Receipt this Period 42.18
	FEC ID number of contributing federal political committee. C	Payroll contribution per cycle \$21.09
	Name of Employer Blue Shield of California Occupation Employee Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 544.59	

C.	Full Name (Last, First, Middle Initial) Christine Amacher	Date of Receipt MM / DD / YYYY 12 / 31 / 2010
	Mailing Address Employee #xx0096 50 Beale Street	Transaction ID: SA11AI.11302
	City State Zip Code San Francisco CA 94105	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	Payroll contribution per cycle \$25.00
	Name of Employer Blue Shield of CA Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 475.00	

SUBTOTAL of Receipts This Page (optional)	▶	117.18
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 71
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
BLUE SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) Robert T Amland II	Date of Receipt MM / DD / YYYY 12 / 31 / 2010
	Mailing Address 50 Beale Street	Transaction ID: SA11AI.11303
	City State Zip Code San Francisco CA 94105	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. C	Payroll contribution per cycle \$10.00
	Name of Employer Blue Shield of CA Occupation Employee #xx5875 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 260.00	

B.	Full Name (Last, First, Middle Initial) Scott Anderson	Date of Receipt MM / DD / YYYY 12 / 31 / 2010
	Mailing Address Employee #xx4951 50 Beale Street	Transaction ID: SA11AI.11305
	City State Zip Code San Francisco CA 94105	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. C	Payroll contribution per cycle \$10.00
	Name of Employer Blue Shield of CA Occupation Employee Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 260.00	

C.	Full Name (Last, First, Middle Initial) David A Arnold Jr.	Date of Receipt MM / DD / YYYY 12 / 31 / 2010
	Mailing Address emp xx4648 50 Beale Street	Transaction ID: SA11AI.11306
	City State Zip Code San Francisco CA 94105	Amount of Each Receipt this Period 70.00
	FEC ID number of contributing federal political committee. C	Payroll contribution per cycle \$35.00
	Name of Employer Blue Shield Occupation Employee Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 790.00	

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)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 71

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
BLUE SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) Terri J. Baker		Date of Receipt
	Mailing Address emp xx1950, 50 Beale Street		<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	San Francisco	CA	94105
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.11308
Name of Employer Blue Shield of California		Occupation Employee	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="572.00"/>	<input type="text" value="44.00"/>
			Payroll contribution per cycle \$22.00

B.	Full Name (Last, First, Middle Initial) Tanya Ballow		Date of Receipt
	Mailing Address emp xx8347 50 Beale Street		<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	San Francisco	CA	94105
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.11309
Name of Employer Blue Shield of California		Occupation employee # 108347	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="585.00"/>	<input type="text" value="45.00"/>
			Payroll contribution per cycle \$22.50

C.	Full Name (Last, First, Middle Initial) Bret Balousek		Date of Receipt
	Mailing Address emp xx5527 50 Beale Street		<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	San Francisco	CA	94105
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.11310
Name of Employer Blue Shield of California		Occupation employee # 115527	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="390.00"/>	<input type="text" value="30.00"/>
			Payroll contribution per cycle \$15.00

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="119.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 71
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
BLUE SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) Patrick Banghart	Date of Receipt MM / DD / YYYY 12 / 31 / 2010
	Mailing Address emp xx5427 50 Beale Street	Transaction ID: SA11AI.11311
	City State Zip Code San Francisco CA 94105	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. C	Payroll contribution per cycle \$10.00
	Name of Employer Blue Shield of California Occupation Employee Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 260.00	

B.	Full Name (Last, First, Middle Initial) Tracy Barnes	Date of Receipt MM / DD / YYYY 12 / 31 / 2010
	Mailing Address emp xx2076 50 Beale Street	Transaction ID: SA11AI.11312
	City State Zip Code San Francisco CA 94105	Amount of Each Receipt this Period 80.00
	FEC ID number of contributing federal political committee. C	Payroll contribution per cycle \$40.00
	Name of Employer Blue Shield of California Occupation Employee Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1040.00	

C.	Full Name (Last, First, Middle Initial) Earl W. Barron III	Date of Receipt MM / DD / YYYY 12 / 31 / 2010
	Mailing Address Employee #xx6501 50 Beale St.,	Transaction ID: SA11AI.11313
	City State Zip Code San Francisco CA 94105	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	Payroll contribution per cycle \$25.00
	Name of Employer Blue Shield of CA Occupation Employee Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 650.00	

SUBTOTAL of Receipts This Page (optional)	150.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: PAGE 10 / 71
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
BLUE SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
 David A. Battin

Mailing Address Employee #xx4657
 50 Beale St.,

City State Zip Code
 San Francisco CA 94105

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
 Blue Shield of CA Employee

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 260.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 2 / 3 1 / 2 0 1 0

Transaction ID: SA11AI.11315

Amount of Each Receipt this Period
 20.00

Payroll contribution per cycle \$10.00

B. Full Name (Last, First, Middle Initial)
 Seth J Berman

Mailing Address emp xx5035
 50 Beale Street

City State Zip Code
 San Francisco CA 94105

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
 Blue Shield Employee

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 260.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 2 / 3 1 / 2 0 1 0

Transaction ID: SA11AI.11316

Amount of Each Receipt this Period
 20.00

Payroll contribution per cycle \$10.00

C. Full Name (Last, First, Middle Initial)
 Vivek Bhatia

Mailing Address emp xx3173
 50 Beale Street

City State Zip Code
 San Francisco CA 94105

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
 Blue Shield of California Employee

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 470.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 2 / 3 1 / 2 0 1 0

Transaction ID: SA11AI.11317

Amount of Each Receipt this Period
 50.00

Payroll contribution per cycle \$25.00

SUBTOTAL of Receipts This Page (optional) ▶ **90.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 / 71
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
BLUE SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) Douglas Biehn	Date of Receipt MM / DD / YYYY 12 / 31 / 2010
	Mailing Address emp xx2903, 50 Beale Street	Transaction ID: SA11AI.11318
	City State Zip Code San Francisco CA 94105	Amount of Each Receipt this Period 40.00
	FEC ID number of contributing federal political committee. C	Payroll contribution per cycle \$20.00
	Name of Employer Blue Shield Occupation employee Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 520.00	

B.	Full Name (Last, First, Middle Initial) Gary Boatwright	Date of Receipt MM / DD / YYYY 12 / 31 / 2010
	Mailing Address Employee #xx7003 50 Beale St.,	Transaction ID: SA11AI.11319
	City State Zip Code San Francisco CA 94105	Amount of Each Receipt this Period 30.00
	FEC ID number of contributing federal political committee. C	Payroll contribution per cycle \$15.00
	Name of Employer Blue Shield of CA Occupation Employee Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 390.00	

C.	Full Name (Last, First, Middle Initial) Bruce Bodaken	Date of Receipt MM / DD / YYYY 12 / 31 / 2010
	Mailing Address emp xx6451 50 Beale Street	Transaction ID: SA11AI.11320
	City State Zip Code San Francisco CA 94105	Amount of Each Receipt this Period 120.00
	FEC ID number of contributing federal political committee. C	Payroll contribution per cycle \$60.00
	Name of Employer Blue Shield of California Occupation Chief Executive Officer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1560.00	

SUBTOTAL of Receipts This Page (optional)	190.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 / 71
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
BLUE SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) Cynthia Bottenhagen	Date of Receipt MM / DD / YYYY 12 / 31 / 2010
	Mailing Address Employee # xx1949 50 Beale Street	Transaction ID: SA11AI.11321
	City State Zip Code San Francisco CA 94105	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	Payroll contribution per cycle \$25.00
	Name of Employer Blue Shield of CA Occupation Employee Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 350.00	

B.	Full Name (Last, First, Middle Initial) John Bradley	Date of Receipt MM / DD / YYYY 12 / 31 / 2010
	Mailing Address emp xx4962 50 Beale Street	Transaction ID: SA11AI.11322
	City State Zip Code San Francisco CA 94105	Amount of Each Receipt this Period 30.00
	FEC ID number of contributing federal political committee. C	Payroll contribution per cycle \$30.00
	Name of Employer Blue Shield of California Occupation employee Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 690.00	

C.	Full Name (Last, First, Middle Initial) Diane Brennan	Date of Receipt MM / DD / YYYY 12 / 31 / 2010
	Mailing Address Employee #xx5384 50 Beale St.,	Transaction ID: SA11AI.11323
	City State Zip Code San Francisco CA 94105	Amount of Each Receipt this Period 30.00
	FEC ID number of contributing federal political committee. C	Payroll contribution per cycle \$15.00
	Name of Employer Blue Shield of CA Occupation Employee Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 390.00	

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)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 71
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
BLUE SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
 Rene D. Brhely
 Mailing Address Employee #xx0924
 50 Beale St.,
 City San Francisco State CA Zip Code 94105
 Date of Receipt MM / DD / YYYY
 12 / 31 / 2010
Transaction ID: SA11AI.11324
 Amount of Each Receipt this Period
 30.00
 Payroll contribution per cycle \$15.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Blue Shield of CA Occupation Employee
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 390.00

B. Full Name (Last, First, Middle Initial)
 Ruta Britts
 Mailing Address emp xx2060
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 Date of Receipt MM / DD / YYYY
 12 / 31 / 2010
Transaction ID: SA11AI.11325
 Amount of Each Receipt this Period
 40.00
 Payroll contribution per cycle \$20.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Blue Shield Occupation employee
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 520.00

C. Full Name (Last, First, Middle Initial)
 Laverne A Brizendine
 Mailing Address emp xx6076
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 Date of Receipt MM / DD / YYYY
 12 / 31 / 2010
Transaction ID: SA11AI.11326
 Amount of Each Receipt this Period
 50.00
 Payroll contribution per cycle \$25.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Blue Shield Occupation Employee
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 470.00

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) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 / 71
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
BLUE SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) Thomas Brophy		Date of Receipt
	Mailing Address emp xx4076, 50 Beale Street		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	San Francisco	CA	94105
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.11327
Name of Employer Blue Cross		Occupation employee	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 520.00	40.00
			Payroll contribution per cycle \$20.00

B.	Full Name (Last, First, Middle Initial) William Brown		Date of Receipt
	Mailing Address emp xx9004, 50 Beale Street		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	San Francisco	CA	94105
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.11328
Name of Employer Blue Shield		Occupation employee	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 725.19	50.46
			Payroll contribution per cycle \$25.23

C.	Full Name (Last, First, Middle Initial) Michael-Anne Browne		Date of Receipt
	Mailing Address emp xx1514 50 Beale Street		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	San Francisco	CA	94105
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.11329
Name of Employer Blue Shield of California		Occupation Employee	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 650.00	50.00
			Payroll contribution per cycle \$25.00

SUBTOTAL of Receipts This Page (optional)	140.46
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: PAGE 15 / 71
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
BLUE SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
Sue Burke

Mailing Address emp xx4016
50 Beale Street

City San Francisco State CA Zip Code 94105

FEC ID number of contributing federal political committee. **C**

Name of Employer Blue Shield of California Occupation employee

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt MM / DD / YYYY
12 / 31 / 2010

Transaction ID: SA11AI.11330

Amount of Each Receipt this Period 20.00

Payroll contribution per cycle \$10.00

B. Full Name (Last, First, Middle Initial)
Michele Carrillo

Mailing Address emp xx2162, 50 Beale Street

City San Francisco State CA Zip Code 94105

FEC ID number of contributing federal political committee. **C**

Name of Employer Blue Shield Occupation employee

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt MM / DD / YYYY
12 / 31 / 2010

Transaction ID: SA11AI.11331

Amount of Each Receipt this Period 20.00

Payroll contribution per cycle \$10.00

C. Full Name (Last, First, Middle Initial)
Wendy Cerruti

Mailing Address emp xx2821, 50 Beale Street

City San Francisco State CA Zip Code 94105

FEC ID number of contributing federal political committee. **C**

Name of Employer Blue Shield Occupation employee

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1300.00

Date of Receipt MM / DD / YYYY
12 / 31 / 2010

Transaction ID: SA11AI.11333

Amount of Each Receipt this Period 100.00

Payroll contribution per cycle \$50.00

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)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 16 / 71
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
BLUE SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
George R. Chadwell

Mailing Address emp xx0628
50 Beale Street

City San Francisco State CA Zip Code 94105

FEC ID number of contributing federal political committee. **C**

Name of Employer Blue Shield of California Occupation Employee

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 362.54

Date of Receipt 12 / 31 / 2010
Transaction ID: SA11AI.11334
Amount of Each Receipt this Period 27.56
Payroll contribution per cycle \$13.78

B. Full Name (Last, First, Middle Initial)
Michael Chiarodit

Mailing Address Employee #xx7088
50 Beale St.,

City San Francisco State CA Zip Code 94105

FEC ID number of contributing federal political committee. **C**

Name of Employer Blue Shield of CA Occupation Employee

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 390.00

Date of Receipt 12 / 31 / 2010
Transaction ID: SA11AI.11336
Amount of Each Receipt this Period 30.00
Payroll contribution per cycle \$15.00

C. Full Name (Last, First, Middle Initial)
Denise Ciufu

Mailing Address emp xx4063, 50 Beale Street

City San Francisco State CA Zip Code 94105

FEC ID number of contributing federal political committee. **C**

Name of Employer Blue Shield Occupation employee

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 31 / 2010
Transaction ID: SA11AI.11337
Amount of Each Receipt this Period 20.00
Payroll contribution per cycle \$10.00

SUBTOTAL of Receipts This Page (optional) ► 77.56

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 / 71
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
BLUE SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) Karen Clark	Date of Receipt MM / DD / YYYY 12 / 31 / 2010
	Mailing Address Employee #xx3881 50 Beale St.,	Transaction ID: SA11AI.11338
	City State Zip Code San Francisco CA 94105	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. C	Payroll contribution per cycle \$10.00
	Name of Employer Blue Shield of CA Occupation Employee Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 260.00	

B.	Full Name (Last, First, Middle Initial) Eva I Condrón-Wells	Date of Receipt MM / DD / YYYY 12 / 31 / 2010
	Mailing Address emp xx6079 50 Beale Street	Transaction ID: SA11AI.11339
	City State Zip Code San Francisco CA 94105	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. C	Payroll contribution per cycle \$10.00
	Name of Employer Blue Shield Occupation Employee Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00	

C.	Full Name (Last, First, Middle Initial) Maureen Craig	Date of Receipt MM / DD / YYYY 12 / 31 / 2010
	Mailing Address Employee #xx7065 50 Beale St.,	Transaction ID: SA11AI.11340
	City State Zip Code San Francisco CA 94105	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. C	Payroll contribution per cycle \$10.00
	Name of Employer Blue Shield of CA Occupation Employee Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 260.00	

SUBTOTAL of Receipts This Page (optional)	60.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 / 71
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
BLUE SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) Edward Cymerys	Date of Receipt MM / DD / YYYY 12 / 31 / 2010
	Mailing Address emp xx4609, 50 Beale Street	Transaction ID: SA11AI.11342
	City State Zip Code San Francisco CA 94105	Amount of Each Receipt this Period 200.00
	FEC ID number of contributing federal political committee. C	Payroll contribution per cycle \$100.00
	Name of Employer Blue Shield Occupation employee Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 2600.00	

B.	Full Name (Last, First, Middle Initial) Susan Deleeuw	Date of Receipt MM / DD / YYYY 12 / 31 / 2010
	Mailing Address emp xx4798 50 Beale Street	Transaction ID: SA11AI.11345
	City State Zip Code San Francisco CA 94105	Amount of Each Receipt this Period 45.00
	FEC ID number of contributing federal political committee. C	Payroll contribution per cycle \$22.50
	Name of Employer Blue Shield of California Occupation employee Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 585.00	

C.	Full Name (Last, First, Middle Initial) Kevin DeLury	Date of Receipt MM / DD / YYYY 12 / 31 / 2010
	Mailing Address Employee #xx5871 50 Beale St.,	Transaction ID: SA11AI.11346
	City State Zip Code San Francisco CA 94105	Amount of Each Receipt this Period 30.00
	FEC ID number of contributing federal political committee. C	Payroll contribution per cycle \$15.00
	Name of Employer Blue Shield of CA Occupation Employee Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 390.00	

SUBTOTAL of Receipts This Page (optional)	275.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: PAGE 19 / 71
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
BLUE SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
Ann DeRose

Mailing Address emp xx3203
50 Beale Street

City San Francisco State CA Zip Code 94105

FEC ID number of contributing federal political committee. **C**

Name of Employer Blue Shield of California Occupation employee

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 585.00

Date of Receipt 12 / 31 / 2010
Transaction ID: SA11AI.11347
 Amount of Each Receipt this Period 45.00
 Payroll contribution per cycle \$22.50

B. Full Name (Last, First, Middle Initial)
Patricia R. Domenickine

Mailing Address emp xx1504
50 Beale Street

City San Francisco State CA Zip Code 94105

FEC ID number of contributing federal political committee. **C**

Name of Employer Blue Shield of California Occupation Employee

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1170.00

Date of Receipt 12 / 31 / 2010
Transaction ID: SA11AI.11348
 Amount of Each Receipt this Period 90.00
 Payroll contribution per cycle \$45.00

C. Full Name (Last, First, Middle Initial)
Marjorie Drake

Mailing Address emp xx6271
50 Beale Street

City San Francisco State CA Zip Code 94105

FEC ID number of contributing federal political committee. **C**

Name of Employer Blue Shield of California Occupation IFP Underwriting

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 31 / 2010
Transaction ID: SA11AI.11352
 Amount of Each Receipt this Period 20.00
 Payroll contribution per cycle \$10.00

SUBTOTAL of Receipts This Page (optional) ► 155.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 / 71
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
BLUE SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) James Elliott		Date of Receipt
	Mailing Address emp xx5549 50 Beale Street		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 2 / 3 1 / 2 0 1 0
	City	State	Zip Code
	San Francisco	CA	94105
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.11353
Name of Employer Blue Shield of California		Occupation employee	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 2600.00	200.00
Payroll contribution per cycle \$100.00			

B.	Full Name (Last, First, Middle Initial) Thomas Epstein		Date of Receipt
	Mailing Address emp xx0249 50 Beale Street		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 2 / 3 1 / 2 0 1 0
	City	State	Zip Code
	San Francisco	CA	94105
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.11355
Name of Employer Blue Shield of California		Occupation Vice President, Public Affairs	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1760.00	140.00
Payroll contribution per cycle \$70.00			

C.	Full Name (Last, First, Middle Initial) Jacqueline Espinoza		Date of Receipt
	Mailing Address emp xx5623 50 Beale Street		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 2 / 3 1 / 2 0 1 0
	City	State	Zip Code
	San Francisco	CA	94105
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.11356
Name of Employer Blue Shield of California		Occupation employee	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 780.00	60.00
Payroll contribution per cycle \$30.00			

SUBTOTAL of Receipts This Page (optional)	400.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: PAGE 21 / 71
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
BLUE SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
Elizabeth Este

Mailing Address Employee #xx5702
50 Beale St.,

City San Francisco State CA Zip Code 94105

FEC ID number of contributing federal political committee. **C**

Name of Employer Blue Shield of CA Occupation Employee

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 31 / 2010
Transaction ID: SA11AI.11357
 Amount of Each Receipt this Period 20.00
 Payroll contribution per cycle \$10.00

B. Full Name (Last, First, Middle Initial)
Kathryn M. Ferguson

Mailing Address emp xx2319
50 Beale Street

City San Francisco State CA Zip Code 94105

FEC ID number of contributing federal political committee. **C**

Name of Employer Blue Shield of California Occupation Employee

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 442.00

Date of Receipt 12 / 31 / 2010
Transaction ID: SA11AI.11358
 Amount of Each Receipt this Period 34.00
 Payroll contribution per cycle \$17.00

C. Full Name (Last, First, Middle Initial)
Heidi Fields

Mailing Address Employee #xx2238
50 Beale St.,

City San Francisco State CA Zip Code 94105

FEC ID number of contributing federal political committee. **C**

Name of Employer Blue Shield of CA Occupation Employee

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 3141.00

Date of Receipt 12 / 31 / 2010
Transaction ID: SA11AI.11359
 Amount of Each Receipt this Period 241.48
 Payroll contribution per cycle \$120.74

SUBTOTAL of Receipts This Page (optional) ► 295.48

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 / 71
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
BLUE SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) Carol Fogelman	Date of Receipt MM / DD / YYYY 12 / 31 / 2010
	Mailing Address emp xx2239 50 Beale Street	Transaction ID: SA11AI.11361
	City State Zip Code San Francisco CA 94105	Amount of Each Receipt this Period 29.24
	FEC ID number of contributing federal political committee. C	Payroll contribution per cycle \$14.62
	Name of Employer Blue Shield of California Occupation Employee Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Aggregate Year-to-Date ▼ <input type="checkbox"/> Other (specify) ▼ 382.64	

B.	Full Name (Last, First, Middle Initial) Joseph Foley	Date of Receipt MM / DD / YYYY 12 / 31 / 2010
	Mailing Address emp xx4742 50 Beale Street	Transaction ID: SA11AI.11362
	City State Zip Code San Francisco CA 94105	Amount of Each Receipt this Period 25.34
	FEC ID number of contributing federal political committee. C	Payroll contribution per cycle \$12.67
	Name of Employer Blue Shield of California Occupation employee Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Aggregate Year-to-Date ▼ <input type="checkbox"/> Other (specify) ▼ 328.81	

C.	Full Name (Last, First, Middle Initial) Armine Fortunato	Date of Receipt MM / DD / YYYY 12 / 31 / 2010
	Mailing Address Employee #xx5680 50 Beale Street	Transaction ID: SA11AI.11363
	City State Zip Code San Francisco CA 94105	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	Payroll contribution per cycle \$25.00
	Name of Employer Blue Shield of CA Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Aggregate Year-to-Date ▼ <input type="checkbox"/> Other (specify) ▼ 650.00	

SUBTOTAL of Receipts This Page (optional)	104.58
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: PAGE 23 / 71
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
BLUE SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
 Gregory Gardiner
 Mailing Address Employee #xx7674
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 Date of Receipt 12 / 31 / 2010
Transaction ID: SA11AI.11364
 Amount of Each Receipt this Period 50.00
 Payroll contribution per cycle \$25.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Blue Shield of CA Occupation Employee
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

B. Full Name (Last, First, Middle Initial)
 Mark Gastineau
 Mailing Address emp xx5296
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 Date of Receipt 12 / 31 / 2010
Transaction ID: SA11AI.11365
 Amount of Each Receipt this Period 80.00
 Payroll contribution per cycle \$40.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Blue Shield of California Occupation employee
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1040.00

C. Full Name (Last, First, Middle Initial)
 Walter W Gendell
 Mailing Address emp xx7670
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 Date of Receipt 12 / 31 / 2010
Transaction ID: SA11AI.11366
 Amount of Each Receipt this Period 30.00
 Payroll contribution per cycle \$15.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Blue Shield Occupation Employee
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 390.00

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) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 / 71
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
BLUE SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) Devin Gensch	Date of Receipt MM / DD / YYYY 12 / 31 / 2010
	Mailing Address emp xx4081 50 Beale Street	Transaction ID: SA11AI.11367
	City State Zip Code San Francisco CA 94105	Amount of Each Receipt this Period 56.00
	FEC ID number of contributing federal political committee. C	Payroll contribution per cycle \$28.00
	Name of Employer Occupation Blue Shield of California employee	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Aggregate Year-to-Date ▼ 728.00		

B.	Full Name (Last, First, Middle Initial) Robert Geyer	Date of Receipt MM / DD / YYYY 12 / 31 / 2010
	Mailing Address emp xx2026 50 Beale Street	Transaction ID: SA11AI.11368
	City State Zip Code San Francisco CA 94105	Amount of Each Receipt this Period 150.00
	FEC ID number of contributing federal political committee. C	Payroll contribution per cycle \$75.00
	Name of Employer Occupation Blue Shield of California Vice President	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Aggregate Year-to-Date ▼ 1950.00		

C.	Full Name (Last, First, Middle Initial) Ketan Gima	Date of Receipt MM / DD / YYYY 12 / 31 / 2010
	Mailing Address emp xx2246 50 Beale Street	Transaction ID: SA11AI.11369
	City State Zip Code San Francisco CA 94105	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	Payroll contribution per cycle \$50.00
	Name of Employer Occupation Blue Shield of California Manager	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Aggregate Year-to-Date ▼ 1300.00		

SUBTOTAL of Receipts This Page (optional)	306.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 25 / 71
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
BLUE SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial) Deborah Gordon		Date of Receipt MM / DD / YYYY 12 / 31 / 2010
Mailing Address emp xx5621 50 Beale Street		Transaction ID: SA11AI.11376
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 45.00
Name of Employer Blue Shield of California	Occupation employee	Payroll contribution per cycle \$22.50
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 585.00	

B.

Full Name (Last, First, Middle Initial) Christopher Gorecki		Date of Receipt MM / DD / YYYY 12 / 31 / 2010
Mailing Address emp xx5257 50 Beale Street		Transaction ID: SA11AI.11377
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 40.00
Name of Employer Blue Shield of California	Occupation employee	Payroll contribution per cycle \$20.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 520.00	

C.

Full Name (Last, First, Middle Initial) Reva Gould		Date of Receipt MM / DD / YYYY 12 / 31 / 2010
Mailing Address Employee #xx7893 50 Beale Street		Transaction ID: SA11AI.11378
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer Blue Shield of CA	Occupation Employee	Payroll contribution per cycle \$25.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00	

SUBTOTAL of Receipts This Page (optional)	135.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: PAGE 26 / 71
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
BLUE SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
 Douglas Grant

Mailing Address emp xx7417
 50 Beale Street

City San Francisco State CA Zip Code 94105

FEC ID number of contributing federal political committee. **C**

Name of Employer Blue Shield of California Occupation Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt MM / DD / YYYY
 12 / 31 / 2010

Transaction ID: SA11AI.11380

Amount of Each Receipt this Period 20.00

Payroll contribution per cycle \$10.00

B. Full Name (Last, First, Middle Initial)
 Christy Gregg

Mailing Address emp xx2233
 50 Beale Street

City San Francisco State CA Zip Code 94105

FEC ID number of contributing federal political committee. **C**

Name of Employer Blue Shield of California Occupation employee

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 585.00

Date of Receipt MM / DD / YYYY
 12 / 31 / 2010

Transaction ID: SA11AI.11381

Amount of Each Receipt this Period 45.00

Payroll contribution per cycle \$22.50

C. Full Name (Last, First, Middle Initial)
 David Hall

Mailing Address Employee #xx5061
 50 Beale St.,

City San Francisco State CA Zip Code 94105

FEC ID number of contributing federal political committee. **C**

Name of Employer Blue Shield of CA Occupation Employee

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt MM / DD / YYYY
 12 / 31 / 2010

Transaction ID: SA11AI.11384

Amount of Each Receipt this Period 20.00

Payroll contribution per cycle \$10.00

SUBTOTAL of Receipts This Page (optional) ► 85.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 / 71
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
BLUE SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) Melissa Hall	Date of Receipt MM / DD / YYYY 12 / 31 / 2010
	Mailing Address emp xx5540 50 Beale Street	Transaction ID: SA11AI.11385
	City State Zip Code San Francisco CA 94105	Amount of Each Receipt this Period 60.00
	FEC ID number of contributing federal political committee. C	Payroll contribution per cycle \$30.00
	Name of Employer Occupation Blue Shield of California employee	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 780.00	

B.	Full Name (Last, First, Middle Initial) John Hedberg	Date of Receipt MM / DD / YYYY 12 / 31 / 2010
	Mailing Address Employee #xx7678 50 Beale Street	Transaction ID: SA11AI.11389
	City State Zip Code San Francisco CA 94105	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	Payroll contribution per cycle \$25.00
	Name of Employer Occupation Blue Shield of CA Employee	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 375.00	

C.	Full Name (Last, First, Middle Initial) Jeffrey Hermosillo	Date of Receipt MM / DD / YYYY 12 / 31 / 2010
	Mailing Address emp xx4845 50 Beale Street	Transaction ID: SA11AI.11390
	City State Zip Code San Francisco CA 94105	Amount of Each Receipt this Period 45.00
	FEC ID number of contributing federal political committee. C	Payroll contribution per cycle \$22.50
	Name of Employer Occupation Blue Shield of California employee	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 585.00	

SUBTOTAL of Receipts This Page (optional)	▶	155.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 / 71
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
BLUE SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) Larry Hilty		Date of Receipt
	Mailing Address emp xx9314 50 Beale Street		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 2 / 3 1 / 2 0 1 0
	City	State	Zip Code
	San Francisco	CA	94105
	FEC ID number of contributing federal political committee.		Transaction ID: SA11AI.11392
	C <input type="text"/>		Amount of Each Receipt this Period
Name of Employer Blue Shield of California		Occupation Employee	Payroll contribution per cycle \$15.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	
		<input type="text"/> 390.00	

B.	Full Name (Last, First, Middle Initial) Louis Hirsh		Date of Receipt
	Mailing Address emp xx9409 50 Beale Street		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 2 / 3 1 / 2 0 1 0
	City	State	Zip Code
	San Francisco	CA	94105
	FEC ID number of contributing federal political committee.		Transaction ID: SA11AI.11393
	C <input type="text"/>		Amount of Each Receipt this Period
Name of Employer Blue Shield of California		Occupation Employee	Payroll contribution per cycle \$22.50
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	
		<input type="text"/> 585.00	

C.	Full Name (Last, First, Middle Initial) Brent Hitchings		Date of Receipt
	Mailing Address emp xx5569 50 Beale Street		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 2 / 3 1 / 2 0 1 0
	City	State	Zip Code
	San Francisco	CA	94105
	FEC ID number of contributing federal political committee.		Transaction ID: SA11AI.11394
	C <input type="text"/>		Amount of Each Receipt this Period
Name of Employer Blue Shield of California		Occupation employee	Payroll contribution per cycle \$45.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	
		<input type="text"/> 1170.00	

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 165.00
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 29 / 71
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
BLUE SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial) Jennifer Hobart		Date of Receipt MM / DD / YYYY 12 / 31 / 2010
Mailing Address Employee #xx6684 50 Beale Street		Transaction ID: SA11AI.11395
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 80.00
Name of Employer Blue Shield of CA	Occupation Employee	Payroll contribution per cycle \$40.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

B.

Full Name (Last, First, Middle Initial) Bridget E Hoffman		Date of Receipt MM / DD / YYYY 12 / 31 / 2010
Mailing Address emp xx9335 50 Beale Street		Transaction ID: SA11AI.11396
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
Name of Employer Blue Shield	Occupation Employee	Payroll contribution per cycle \$10.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

C.

Full Name (Last, First, Middle Initial) Helena Hoffman		Date of Receipt MM / DD / YYYY 12 / 31 / 2010
Mailing Address emp xx5671 50 Beale Street		Transaction ID: SA11AI.11397
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 22.00
Name of Employer Blue Shield of California	Occupation Employee	Payroll contribution per cycle \$11.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 286.00	

SUBTOTAL of Receipts This Page (optional)	122.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: PAGE 30 / 71
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
BLUE SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
 Terry Hokinson
 Mailing Address Employee #xx7017
 50 Beale St.,
 City San Francisco State CA Zip Code 94105
 Date of Receipt 12 / 31 / 2010
Transaction ID: SA11AI.11398
 Amount of Each Receipt this Period 50.00
 Payroll contribution per cycle \$25.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Blue Shield of CA Occupation Employee
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

B. Full Name (Last, First, Middle Initial)
 Jeffrey T Hopp
 Mailing Address emp xx2542
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 Date of Receipt 12 / 31 / 2010
Transaction ID: SA11AI.11399
 Amount of Each Receipt this Period 20.00
 Payroll contribution per cycle \$10.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Blue Shield Occupation Employee
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

C. Full Name (Last, First, Middle Initial)
 Michael Horan
 Mailing Address Employee #xx6453
 50 Beale St.,
 City San Francisco State CA Zip Code 94105
 Date of Receipt 12 / 31 / 2010
Transaction ID: SA11AI.11400
 Amount of Each Receipt this Period 20.00
 Payroll contribution per cycle \$10.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Blue Shield of CA Occupation Employee
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

SUBTOTAL of Receipts This Page (optional) ► 90.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 31 / 71
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
BLUE SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial) Stanford Hornbacher		Date of Receipt MM / DD / YYYY 12 / 31 / 2010
Mailing Address emp xx6615 50 Beale Street		Transaction ID: SA11AI.11401
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 45.00
Name of Employer Blue Shield of California	Occupation employee	Payroll contribution per cycle \$22.50
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 585.00	

B.

Full Name (Last, First, Middle Initial) Diana Huang		Date of Receipt MM / DD / YYYY 12 / 31 / 2010
Mailing Address emp xx4587, 50 Beale Street		Transaction ID: SA11AI.11402
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
Name of Employer Blue Shield	Occupation employee	Payroll contribution per cycle \$10.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

C.

Full Name (Last, First, Middle Initial) Thomas Hurd		Date of Receipt MM / DD / YYYY 12 / 31 / 2010
Mailing Address Employee #xx6366 50 Beale Street		Transaction ID: SA11AI.11403
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 60.00
Name of Employer Blue Shield of CA	Occupation Employee	Payroll contribution per cycle \$30.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 390.00	

SUBTOTAL of Receipts This Page (optional)	125.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: PAGE 32 / 71
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
BLUE SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
Tony R. Ibarra

Mailing Address emp xx2981
50 Beale Street

City San Francisco State CA Zip Code 94105

FEC ID number of contributing federal political committee. **C**

Name of Employer Blue Shield of California Occupation Employee

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 390.00

Date of Receipt MM / DD / YYYY
12 / 31 / 2010

Transaction ID: SA11AI.11405

Amount of Each Receipt this Period 30.00

Payroll contribution per cycle \$15.00

B. Full Name (Last, First, Middle Initial)
Marianne Jackson

Mailing Address emp xx2372
50 Beale Street

City San Francisco State CA Zip Code 94105

FEC ID number of contributing federal political committee. **C**

Name of Employer Blue Shield of California Occupation Senior Vice President, Human Resources

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2080.00

Date of Receipt MM / DD / YYYY
12 / 31 / 2010

Transaction ID: SA11AI.11408

Amount of Each Receipt this Period 160.00

Payroll contribution per cycle \$80.00

C. Full Name (Last, First, Middle Initial)
Seth Jacobs

Mailing Address emp xx6574
50 Beale Street

City San Francisco State CA Zip Code 94105

FEC ID number of contributing federal political committee. **C**

Name of Employer Blue Shield of California Occupation Employee

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 655.00

Date of Receipt MM / DD / YYYY
12 / 31 / 2010

Transaction ID: SA11AI.11409

Amount of Each Receipt this Period 55.00

Payroll contribution per cycle \$27.50

SUBTOTAL of Receipts This Page (optional) ► 245.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 / 71
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
BLUE SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) George Jaresko	Date of Receipt MM / DD / YYYY 12 / 31 / 2010
	Mailing Address emp xx5244 50 Beale Street	Transaction ID: SA11AI.11410
	City State Zip Code San Francisco CA 94105	Amount of Each Receipt this Period 30.00
	FEC ID number of contributing federal political committee. C	Payroll contribution per cycle \$15.00
	Name of Employer Blue Shield of California Occupation employee Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 390.00	

B.	Full Name (Last, First, Middle Initial) Lorie Johns	Date of Receipt MM / DD / YYYY 12 / 31 / 2010
	Mailing Address Employee #xx5447 50 Beale St.,	Transaction ID: SA11AI.11411
	City State Zip Code San Francisco CA 94105	Amount of Each Receipt this Period 45.00
	FEC ID number of contributing federal political committee. C	Payroll contribution per cycle \$22.50
	Name of Employer Blue Shield of CA Occupation Employee Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 585.00	

C.	Full Name (Last, First, Middle Initial) Michael Johnson	Date of Receipt MM / DD / YYYY 12 / 31 / 2010
	Mailing Address emp xx1769 50 Beale Street	Transaction ID: SA11AI.11412
	City State Zip Code San Francisco CA 94105	Amount of Each Receipt this Period 60.00
	FEC ID number of contributing federal political committee. C	Payroll contribution per cycle \$30.00
	Name of Employer Blue Shield of California Occupation Employee Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 780.00	

SUBTOTAL of Receipts This Page (optional)	135.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 / 71
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
BLUE SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) David Joyner	Date of Receipt M M / D D / Y Y Y Y 1 2 / 3 1 / 2 0 1 0
	Mailing Address emp xx9639 50 Beale Street	Transaction ID: SA11AI.11413
	City State Zip Code San Francisco CA 94105	Amount of Each Receipt this Period 80.00
	FEC ID number of contributing federal political committee. C	Payroll contribution per cycle \$40.00
	Name of Employer Occupation Blue Shield of California Vice President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1040.00	

B.	Full Name (Last, First, Middle Initial) Allison Kawamoto	Date of Receipt M M / D D / Y Y Y Y 1 2 / 3 1 / 2 0 1 0
	Mailing Address emp xx4997 50 Beale Street	Transaction ID: SA11AI.11414
	City State Zip Code San Francisco CA 94105	Amount of Each Receipt this Period 27.88
	FEC ID number of contributing federal political committee. C	Payroll contribution per cycle \$13.94
	Name of Employer Occupation Blue Shield of California employee	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 360.38	

C.	Full Name (Last, First, Middle Initial) Tina Kibler	Date of Receipt M M / D D / Y Y Y Y 1 2 / 3 1 / 2 0 1 0
	Mailing Address emp xx5267 50 Beale Street	Transaction ID: SA11AI.11417
	City State Zip Code San Francisco CA 94105	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	Payroll contribution per cycle \$50.00
	Name of Employer Occupation Blue Shield of California employee	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 700.00	

SUBTOTAL of Receipts This Page (optional)	207.88
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 / 71
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
BLUE SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) Keith Kim	Date of Receipt MM / DD / YYYY 12 / 31 / 2010
	Mailing Address Employee #xx5487 50 Beale St.,	Transaction ID: SA11AI.11418
	City State Zip Code San Francisco CA 94105	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	Payroll contribution per cycle \$25.00
	Name of Employer Occupation Blue Shield of CA Employee	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00	

B.	Full Name (Last, First, Middle Initial) Yun Kim	Date of Receipt MM / DD / YYYY 12 / 31 / 2010
	Mailing Address emp xx9394 50 Beale Street	Transaction ID: SA11AI.11419
	City State Zip Code San Francisco CA 94105	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. C	Payroll contribution per cycle \$10.00
	Name of Employer Occupation Blue Shield of California Employee	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

C.	Full Name (Last, First, Middle Initial) Herbert F. Kirschner	Date of Receipt MM / DD / YYYY 12 / 31 / 2010
	Mailing Address emp xx3702 50 Beale Street	Transaction ID: SA11AI.11420
	City State Zip Code San Francisco CA 94105	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	Payroll contribution per cycle \$25.00
	Name of Employer Occupation Blue Shield of California Employee	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00	

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)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 36 / 71
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
BLUE SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
 Nora Lam
 Mailing Address emp xx5642
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 Date of Receipt 12 / 31 / 2010
Transaction ID: SA11AI.11421
 Amount of Each Receipt this Period 30.00
 Payroll contribution per cycle \$15.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Blue Shield of California Occupation employee
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date 390.00

B. Full Name (Last, First, Middle Initial)
 Lisa Lambert
 Mailing Address emp xx2157, 50 Beale Street
 City San Francisco State CA Zip Code 94105
 Date of Receipt 12 / 31 / 2010
Transaction ID: SA11AI.11422
 Amount of Each Receipt this Period 20.00
 Payroll contribution per cycle \$10.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Blue Shield Occupation employee
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date 260.00

C. Full Name (Last, First, Middle Initial)
 Janice A Lea
 Mailing Address emp xx2048
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 Date of Receipt 12 / 31 / 2010
Transaction ID: SA11AI.11423
 Amount of Each Receipt this Period 50.00
 Payroll contribution per cycle \$25.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Blue Shield Occupation Employee
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date 650.00

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) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 / 71
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
BLUE SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) Janice Levinsky	Date of Receipt MM / DD / YYYY 12 / 31 / 2010
	Mailing Address emp xx1653 50 Beale Street	Transaction ID: SA11AI.11425
	City San Francisco State CA Zip Code 94105	Amount of Each Receipt this Period 30.00
	FEC ID number of contributing federal political committee. C	Payroll contribution per cycle \$15.00
	Name of Employer Blue Shield of California Occupation employee Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 390.00	

B.	Full Name (Last, First, Middle Initial) Laura Lewis	Date of Receipt MM / DD / YYYY 12 / 31 / 2010
	Mailing Address 50 Beale Street	Transaction ID: SA11AI.11427
	City San Francisco State CA Zip Code 94105	Amount of Each Receipt this Period 45.00
	FEC ID number of contributing federal political committee. C	Payroll contribution per cycle \$22.50
	Name of Employer Blue Shield of California Occupation employee # xx2384 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 585.00	

C.	Full Name (Last, First, Middle Initial) Anthony Lipp	Date of Receipt MM / DD / YYYY 12 / 31 / 2010
	Mailing Address 50 Beale Street	Transaction ID: SA11AI.11428
	City San Francisco State CA Zip Code 94105	Amount of Each Receipt this Period 45.00
	FEC ID number of contributing federal political committee. C	Payroll contribution per cycle \$22.50
	Name of Employer Blue Shield of California Occupation employee # xx4138 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 585.00	

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)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 38 / 71
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
BLUE SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial) Louis Lombardo		Date of Receipt MM / DD / YYYY 12 / 31 / 2010
Mailing Address emp xx5859 50 Beale Street		Transaction ID: SA11AI.11429
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 45.00
Name of Employer Blue Shield of California	Occupation Employee	Payroll contribution per cycle \$22.50
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 585.00	

B.

Full Name (Last, First, Middle Initial) Melissa Loura		Date of Receipt MM / DD / YYYY 12 / 31 / 2010
Mailing Address 50 Beale Street		Transaction ID: SA11AI.11431
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
Name of Employer Blue Shield of California	Occupation employee # xx6790	Payroll contribution per cycle \$10.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

C.

Full Name (Last, First, Middle Initial) Kathleen M. Lucke		Date of Receipt MM / DD / YYYY 12 / 31 / 2010
Mailing Address emp xx1911 50 Beale Street		Transaction ID: SA11AI.11432
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 61.99
Name of Employer Blue Shield of California	Occupation Employee	Payroll contribution per cycle \$31.23
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 820.73	

SUBTOTAL of Receipts This Page (optional)	▶	126.99
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER: PAGE 39 / 71
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
BLUE SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
 Analisa Luippold
 Mailing Address Employee #xx6832
 50 Beale St.,
 City San Francisco State CA Zip Code 94105
 Date of Receipt 12 / 31 / 2010
Transaction ID: SA11AI.11434
 Amount of Each Receipt this Period 20.00
 Payroll contribution per cycle \$10.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Blue Shield of CA Occupation Employee
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

B. Full Name (Last, First, Middle Initial)
 Kathleen Lynaugh
 Mailing Address emp xx9411
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 Date of Receipt 12 / 31 / 2010
Transaction ID: SA11AI.11435
 Amount of Each Receipt this Period 70.00
 Payroll contribution per cycle \$35.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Blue Shield of California Occupation Employee
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 850.00

C. Full Name (Last, First, Middle Initial)
 Elinor Mackinnon
 Mailing Address emp xx3314, 50 Beale Street
 City San Francisco State CA Zip Code 94105
 Date of Receipt 12 / 31 / 2010
Transaction ID: SA11AI.11436
 Amount of Each Receipt this Period 110.00
 Payroll contribution per cycle \$55.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Blue Shield Occupation employee
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1430.00

SUBTOTAL of Receipts This Page (optional) ▶ **200.00**
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER: PAGE 40 / 71
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
BLUE SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
Laura Malone

Mailing Address Employee #xx6330
50 Beale St.,

City State Zip Code
San Francisco CA 94105

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Blue Shield of CA Employee

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 650.00

Date of Receipt
MM / DD / YYYY
12 / 31 / 2010

Transaction ID: SA11AI.11437

Amount of Each Receipt this Period
50.00

Payroll contribution per cycle \$25.00

B. Full Name (Last, First, Middle Initial)
Fred J. Mann

Mailing Address emp xx1151
50 Beale Street

City State Zip Code
San Francisco CA 94105

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Blue Shield of California Employee

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt
MM / DD / YYYY
12 / 31 / 2010

Transaction ID: SA11AI.11438

Amount of Each Receipt this Period
20.00

Payroll contribution per cycle \$10.00

C. Full Name (Last, First, Middle Initial)
Paul Markovich

Mailing Address emp xx6510
50 Beale Street

City State Zip Code
San Francisco CA 94105

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Blue Shield of California Employee

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2132.00

Date of Receipt
MM / DD / YYYY
12 / 31 / 2010

Transaction ID: SA11AI.11439

Amount of Each Receipt this Period
164.00

Payroll contribution per cycle \$82.00

SUBTOTAL of Receipts This Page (optional) ▶ **234.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 / 71
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
BLUE SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) Meredith Mathews	Date of Receipt MM / DD / YYYY 12 / 31 / 2010
	Mailing Address Employee #xx7423 50 Beale Street	Transaction ID: SA11AI.11440
	City State Zip Code San Francisco CA 94105	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	Payroll contribution per cycle \$25.00
	Name of Employer Blue Shield of CA Occupation Employee Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 325.00	

B.	Full Name (Last, First, Middle Initial) Eskander Matta	Date of Receipt MM / DD / YYYY 12 / 31 / 2010
	Mailing Address Employee #xx6953 50 Beale Street	Transaction ID: SA11AI.11441
	City State Zip Code San Francisco CA 94105	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	Payroll contribution per cycle \$25.00
	Name of Employer Blue Shield of CA Occupation Employee Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 350.00	

C.	Full Name (Last, First, Middle Initial) Russell McBrien	Date of Receipt MM / DD / YYYY 12 / 31 / 2010
	Mailing Address Employee #xx7330 50 Beale St.,	Transaction ID: SA11AI.11443
	City State Zip Code San Francisco CA 94105	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. C	Payroll contribution per cycle \$10.00
	Name of Employer Blue Shield of CA Occupation Employee Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 260.00	

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)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 42 / 71
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
BLUE SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
Thomas McCaffery

Mailing Address emp xx5792
50 Beale Street

City San Francisco State CA Zip Code 94105

FEC ID number of contributing federal political committee. **C**

Name of Employer Blue Shield of California Occupation employee

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 780.00

Date of Receipt 12 / 31 / 2010
Transaction ID: SA11AI.11444
Amount of Each Receipt this Period 60.00
Payroll contribution per cycle \$30.00

B. Full Name (Last, First, Middle Initial)
Shelley McFarland

Mailing Address emp xx1236, 50 Beale Street

City San Francisco State CA Zip Code 94105

FEC ID number of contributing federal political committee. **C**

Name of Employer Blue Shield Occupation employee

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 242.26

Date of Receipt 12 / 31 / 2010
Transaction ID: SA11AI.11447
Amount of Each Receipt this Period 18.31
Payroll contribution per cycle \$9.15

C. Full Name (Last, First, Middle Initial)
Catherine McGee

Mailing Address Employee #xx7004
50 Beale St.,

City San Francisco State CA Zip Code 94105

FEC ID number of contributing federal political committee. **C**

Name of Employer Blue Shield of CA Occupation Employee

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 650.00

Date of Receipt 12 / 31 / 2010
Transaction ID: SA11AI.11448
Amount of Each Receipt this Period 50.00
Payroll contribution per cycle \$25.00

SUBTOTAL of Receipts This Page (optional) ► 128.31

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 / 71
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
BLUE SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) William McQueen		Date of Receipt
	Mailing Address Employee #xx5076 50 Beale St.,		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 2 / 3 1 / 2 0 1 0
	City	State	Zip Code
	San Francisco	CA	94105
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.11449
Name of Employer Blue Shield of CA		Occupation Employee	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 20.00
		<input type="text"/> 260.00	Payroll contribution per cycle \$10.00

B.	Full Name (Last, First, Middle Initial) Andrea Minarcin		Date of Receipt
	Mailing Address 50 Beale Street		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 2 / 3 1 / 2 0 1 0
	City	State	Zip Code
	San Francisco	CA	94105
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.11450
Name of Employer Blue Shield of California		Occupation employee # xx4753	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 20.00
		<input type="text"/> 260.00	Payroll contribution per cycle \$10.00

C.	Full Name (Last, First, Middle Initial) Kristen Miranda		Date of Receipt
	Mailing Address emp xx3904, 50 Beale Street		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 2 / 3 1 / 2 0 1 0
	City	State	Zip Code
	San Francisco	CA	94105
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.11451
Name of Employer Blue Shield		Occupation employee	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 80.00
		<input type="text"/> 1040.00	Payroll contribution per cycle \$40.00

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 120.00
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 44 / 71
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
BLUE SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)
David Morris

Mailing Address 50 Beale Street

City San Francisco State CA Zip Code 94105

FEC ID number of contributing federal political committee. **C**

Name of Employer Blue Shield of California Occupation employee # xx4117

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 1 0

Transaction ID: SA11AI.11452

Amount of Each Receipt this Period 20.00

Payroll contribution per cycle \$10.00

B.

Full Name (Last, First, Middle Initial)
Cathleen Murphy

Mailing Address emp xx3067, 50 Beale Street

City San Francisco State CA Zip Code 94105

FEC ID number of contributing federal political committee. **C**

Name of Employer Blue Shield Occupation employee

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 650.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 1 0

Transaction ID: SA11AI.11454

Amount of Each Receipt this Period 50.00

Payroll contribution per cycle \$25.00

C.

Full Name (Last, First, Middle Initial)
Jon Murphy

Mailing Address emp xx2151
50 Beale Street

City San Francisco State CA Zip Code 94105

FEC ID number of contributing federal political committee. **C**

Name of Employer Blue Shield of California Occupation Employee

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 384.93

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 1 0

Transaction ID: SA11AI.11455

Amount of Each Receipt this Period 29.72

Payroll contribution per cycle \$14.86

SUBTOTAL of Receipts This Page (optional) ► 99.72

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 / 71
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
BLUE SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) Michelle Nast	Date of Receipt MM / DD / YYYY 12 / 31 / 2010
	Mailing Address Employee #xx2744 50 Beale St.,	Transaction ID: SA11AI.11456
	City State Zip Code San Francisco CA 94105	Amount of Each Receipt this Period 30.00
	FEC ID number of contributing federal political committee. C	Payroll contribution per cycle \$15.00
	Name of Employer Blue Shield of CA Occupation Employee Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 390.00	

B.	Full Name (Last, First, Middle Initial) Paul Nicknig	Date of Receipt MM / DD / YYYY 12 / 31 / 2010
	Mailing Address 50 Beale Street	Transaction ID: SA11AI.11457
	City State Zip Code San Francisco CA 94105	Amount of Each Receipt this Period 45.00
	FEC ID number of contributing federal political committee. C	Payroll contribution per cycle \$22.50
	Name of Employer Blue Shield of California Occupation employee # xx2383 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 585.00	

C.	Full Name (Last, First, Middle Initial) Christopher O'Brien	Date of Receipt MM / DD / YYYY 12 / 31 / 2010
	Mailing Address Employee #xx6255 50 Beale St.,	Transaction ID: SA11AI.11458
	City State Zip Code San Francisco CA 94105	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	Payroll contribution per cycle \$25.00
	Name of Employer Blue Shield of CA Occupation Employee Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 650.00	

SUBTOTAL of Receipts This Page (optional)	▶	125.00
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER: PAGE 46 / 71
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
BLUE SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
Brian O'Leary

Mailing Address emp xx3278
50 Beale Street

City San Francisco State CA Zip Code 94105

FEC ID number of contributing federal political committee. **C**

Name of Employer Blue Shield of California Occupation employee

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt MM / DD / YYYY
12 / 31 / 2010

Transaction ID: SA11AI.11460

Amount of Each Receipt this Period 20.00

Payroll contribution per cycle \$10.00

B. Full Name (Last, First, Middle Initial)
Mikhael Oganessian

Mailing Address Employee #xx6156
50 Beale St.,

City San Francisco State CA Zip Code 94105

FEC ID number of contributing federal political committee. **C**

Name of Employer Blue Shield of CA Occupation Employee

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt MM / DD / YYYY
12 / 31 / 2010

Transaction ID: SA11AI.11459

Amount of Each Receipt this Period 20.00

Payroll contribution per cycle \$10.00

C. Full Name (Last, First, Middle Initial)
Ana Padilla

Mailing Address Employee #xx6534
50 Beale St.,

City San Francisco State CA Zip Code 94105

FEC ID number of contributing federal political committee. **C**

Name of Employer Blue Shield of CA Occupation Employee

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt MM / DD / YYYY
12 / 31 / 2010

Transaction ID: SA11AI.11462

Amount of Each Receipt this Period 20.00

Payroll contribution per cycle \$10.00

SUBTOTAL of Receipts This Page (optional) ▶ 60.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 47 / 71
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
BLUE SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial) Omar Padilla		Date of Receipt MM / DD / YYYY 12 / 31 / 2010
Mailing Address emp xx6312 50 Beale Street		Transaction ID: SA11AI.11463
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
Name of Employer Blue Shield of California	Occupation employee	Payroll contribution per cycle \$10.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

B.

Full Name (Last, First, Middle Initial) Edith Parker		Date of Receipt MM / DD / YYYY 12 / 31 / 2010
Mailing Address emp xx8223 50 Beale Street		Transaction ID: SA11AI.11464
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
Name of Employer Blue Shield of California	Occupation employee	Payroll contribution per cycle \$10.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

C.

Full Name (Last, First, Middle Initial) Jeffrey Passaro		Date of Receipt MM / DD / YYYY 12 / 31 / 2010
Mailing Address emp xx8615 50 Beale Street		Transaction ID: SA11AI.11465
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 30.00
Name of Employer Blue Shield of California	Occupation employee	Payroll contribution per cycle \$15.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 390.00	

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)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 48 / 71
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
BLUE SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial) Perri Perrin		Date of Receipt MM / DD / YYYY 12 / 31 / 2010
Mailing Address emp xx8823 50 Beale Street		Transaction ID: SA11AI.11467
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
Name of Employer Blue Shield of California	Occupation Employee	Payroll contribution per cycle \$10.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

B.

Full Name (Last, First, Middle Initial) Linda Pietraczyk		Date of Receipt MM / DD / YYYY 12 / 31 / 2010
Mailing Address emp xx6110 50 Beale Street		Transaction ID: SA11AI.11469
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer Blue Shield of California	Occupation employee	Payroll contribution per cycle \$25.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00	

C.

Full Name (Last, First, Middle Initial) Pamela Pisarczyk		Date of Receipt MM / DD / YYYY 12 / 31 / 2010
Mailing Address Employee #xx2841 50 Beale St.,		Transaction ID: SA11AI.11470
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 30.00
Name of Employer Blue Shield of CA	Occupation Employee	Payroll contribution per cycle \$15.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 390.00	

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)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 49 / 71
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
BLUE SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
 Paul Poon
 Mailing Address Employee #xx6412
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 Date of Receipt 12 / 31 / 2010
Transaction ID: SA11AI.11472
 Amount of Each Receipt this Period 50.00
 Payroll contribution per cycle \$25.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Blue Shield of CA Occupation Employee
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

B. Full Name (Last, First, Middle Initial)
 Harry Potter
 Mailing Address Employee #xx7732
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 Date of Receipt 12 / 31 / 2010
Transaction ID: SA11AI.11473
 Amount of Each Receipt this Period 123.08
 Payroll contribution per cycle \$61.54
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Blue Shield of CA Occupation Employee
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 861.56

C. Full Name (Last, First, Middle Initial)
 David Prather
 Mailing Address emp xx5817
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 Date of Receipt 12 / 31 / 2010
Transaction ID: SA11AI.11474
 Amount of Each Receipt this Period 20.00
 Payroll contribution per cycle \$10.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Blue Shield of California Occupation employee
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

SUBTOTAL of Receipts This Page (optional) ► **193.08**
TOTAL This Period (last page this line number only) ►

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 / 71
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
BLUE SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) Joseph Ramey	Date of Receipt MM / DD / YYYY 12 / 31 / 2010
	Mailing Address Employee #xx1935 50 Beale St.,	Transaction ID: SA11AI.11478
	City State Zip Code San Francisco CA 94105	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. C	Payroll contribution per cycle \$10.00
	Name of Employer Occupation Blue Shield of CA Employee	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

B.	Full Name (Last, First, Middle Initial) Eric Rasmussen	Date of Receipt MM / DD / YYYY 12 / 31 / 2010
	Mailing Address 50 Beale Street	Transaction ID: SA11AI.11479
	City State Zip Code San Francisco CA 94105	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. C	Payroll contribution per cycle \$10.00
	Name of Employer Occupation Blue Shield of California Employee	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

C.	Full Name (Last, First, Middle Initial) Kimberley Reed	Date of Receipt MM / DD / YYYY 12 / 31 / 2010
	Mailing Address emp xx9736 50 Beale Street	Transaction ID: SA11AI.11480
	City State Zip Code San Francisco CA 94105	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	Payroll contribution per cycle \$25.00
	Name of Employer Occupation Blue Shield of California employee	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00	

SUBTOTAL of Receipts This Page (optional)	90.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 51 / 71
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
BLUE SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) Julie Reid	Date of Receipt MM / DD / YYYY 12 / 31 / 2010
	Mailing Address emp xx2370 50 Beale Street	Transaction ID: SA11AI.11482
	City State Zip Code San Francisco CA 94105	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	Payroll contribution per cycle \$25.00
	Name of Employer Blue Shield of California Occupation employee Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 650.00	

B.	Full Name (Last, First, Middle Initial) Kenneth Reid	Date of Receipt MM / DD / YYYY 12 / 31 / 2010
	Mailing Address emp xx2508 50 Beale Street	Transaction ID: SA11AI.11483
	City State Zip Code San Francisco CA 94105	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. C	Payroll contribution per cycle \$10.00
	Name of Employer Blue Shield of California Occupation employee Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 260.00	

C.	Full Name (Last, First, Middle Initial) Anurang Revri	Date of Receipt MM / DD / YYYY 12 / 31 / 2010
	Mailing Address Employee #xx4019 50 Beale Street	Transaction ID: SA11AI.11484
	City State Zip Code San Francisco CA 94105	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	Payroll contribution per cycle \$25.00
	Name of Employer Blue Shield of CA Occupation Employee Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 350.00	

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)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 52 / 71
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
BLUE SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
Kathy Richards

Mailing Address emp xx9053
50 Beale Street

City San Francisco State CA Zip Code 94105

FEC ID number of contributing federal political committee. **C**

Name of Employer Blue Shield of California Occupation Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1300.00

Date of Receipt 12 / 31 / 2010
Transaction ID: SA11AI.11485
Amount of Each Receipt this Period 100.00
Payroll contribution per cycle \$50.00

B. Full Name (Last, First, Middle Initial)
Karen Rinaldi

Mailing Address emp xx1645
50 Beale Street

City San Francisco State CA Zip Code 94105

FEC ID number of contributing federal political committee. **C**

Name of Employer Blue Shield of California Occupation Employee

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 340.53

Date of Receipt 12 / 31 / 2010
Transaction ID: SA11AI.11486
Amount of Each Receipt this Period 26.18
Payroll contribution per cycle \$13.09

C. Full Name (Last, First, Middle Initial)
Thad Roake

Mailing Address 50 Beale Street

City San Francisco State CA Zip Code 94105

FEC ID number of contributing federal political committee. **C**

Name of Employer Blue Shield of California Occupation employee # xx5536

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1625.07

Date of Receipt 12 / 31 / 2010
Transaction ID: SA11AI.11487
Amount of Each Receipt this Period 125.36
Payroll contribution per cycle \$62.68

SUBTOTAL of Receipts This Page (optional) ▶ 251.54

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

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

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

FOR LINE NUMBER: PAGE 53 / 71
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
BLUE SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
 Julie Roberts
 Mailing Address 50 Beale Street
 City State Zip Code
 San Francisco CA 94105
 Date of Receipt
 M M / D D / Y Y Y Y
 1 2 / 3 1 / 2 0 1 0
Transaction ID: SA11AI.11488
 Amount of Each Receipt this Period
 30.00
 Payroll contribution per cycle \$15.00
 Name of Employer Occupation
 Blue Shield of California employee # xx3789
 FEC ID number of contributing federal political committee. **C**
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼
 330.00

B. Full Name (Last, First, Middle Initial)
 Norvita Robinson
 Mailing Address emp xx1723, 50 Beale Street
 City State Zip Code
 San Francisco CA 94105
 Date of Receipt
 M M / D D / Y Y Y Y
 1 2 / 3 1 / 2 0 1 0
Transaction ID: SA11AI.11490
 Amount of Each Receipt this Period
 50.00
 Payroll contribution per cycle \$25.00
 Name of Employer Occupation
 Blue Shield employee
 FEC ID number of contributing federal political committee. **C**
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼
 470.00

C. Full Name (Last, First, Middle Initial)
 Robert Rodgers
 Mailing Address Employee #xx7042
 50 Beale St.,
 City State Zip Code
 San Francisco CA 94105
 Date of Receipt
 M M / D D / Y Y Y Y
 1 2 / 3 1 / 2 0 1 0
Transaction ID: SA11AI.11491
 Amount of Each Receipt this Period
 50.00
 Payroll contribution per cycle \$25.00
 Name of Employer Occupation
 Blue Shield of CA Employee
 FEC ID number of contributing federal political committee. **C**
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼
 650.00

SUBTOTAL of Receipts This Page (optional) ► **130.00**
TOTAL This Period (last page this line number only) ►

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

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

FOR LINE NUMBER: PAGE 54 / 71
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
BLUE SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
Garry Ronco

Mailing Address 50 Beale Street

City San Francisco State CA Zip Code 94105

FEC ID number of contributing federal political committee. **C**

Name of Employer Blue Shield of California Occupation employee # xx5653

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 650.00

Date of Receipt 12 / 31 / 2010
Transaction ID: SA11AI.11492
Amount of Each Receipt this Period 50.00
Payroll contribution per cycle \$25.00

B. Full Name (Last, First, Middle Initial)
Martha Saafir

Mailing Address 50 Beale Street

City San Francisco State CA Zip Code 94105

FEC ID number of contributing federal political committee. **C**

Name of Employer Blue Shield of California Occupation employee # xx5645

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 31 / 2010
Transaction ID: SA11AI.11493
Amount of Each Receipt this Period 20.00
Payroll contribution per cycle \$10.00

C. Full Name (Last, First, Middle Initial)
Mark Sachs

Mailing Address 50 Beale Street

City San Francisco State CA Zip Code 94105

FEC ID number of contributing federal political committee. **C**

Name of Employer Blue Shield of California Occupation employee # xx4287

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 390.00

Date of Receipt 12 / 31 / 2010
Transaction ID: SA11AI.11494
Amount of Each Receipt this Period 30.00
Payroll contribution per cycle \$15.00

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)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 55 / 71
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
BLUE SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Joseph Safran

Mailing Address emp xx9164, 50 Beale Street

City San Francisco State CA Zip Code 94105

FEC ID number of contributing federal political committee. **C**

Name of Employer Blue Shield Occupation employee

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 520.00

Date of Receipt 12 / 31 / 2010

Transaction ID: SA11AI.11495

Amount of Each Receipt this Period 40.00

Payroll contribution per cycle \$20.00

B.

Full Name (Last, First, Middle Initial)
Richard Salow

Mailing Address 50 Beale Street

City San Francisco State CA Zip Code 94105

FEC ID number of contributing federal political committee. **C**

Name of Employer Blue Shield of California Occupation employee # xx5516

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 780.00

Date of Receipt 12 / 31 / 2010

Transaction ID: SA11AI.11496

Amount of Each Receipt this Period 60.00

Payroll contribution per cycle \$30.00

C.

Full Name (Last, First, Middle Initial)
Lauri Satterwhaite

Mailing Address emp xx9223
50 Beale Street

City San Francisco State CA Zip Code 94105

FEC ID number of contributing federal political committee. **C**

Name of Employer Blue Shield of California Occupation Employee

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 31 / 2010

Transaction ID: SA11AI.11497

Amount of Each Receipt this Period 20.00

Payroll contribution per cycle \$10.00

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)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 56 / 71
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
BLUE SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial) Naixiu Shen		Date of Receipt MM / DD / YYYY 12 / 31 / 2010
Mailing Address emp xx5834 50 Beale Street		Transaction ID: SA11AI.11499
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 10.00
Name of Employer Blue Shield of California	Occupation employee	Payroll contribution per cycle \$10.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

B.

Full Name (Last, First, Middle Initial) Jason Sims		Date of Receipt MM / DD / YYYY 12 / 31 / 2010
Mailing Address 50 Beale Street		Transaction ID: SA11AI.11500
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 30.00
Name of Employer Blue Shield of California	Occupation employee # xx2432	Payroll contribution per cycle \$15.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 390.00	

C.

Full Name (Last, First, Middle Initial) Alan Smit		Date of Receipt MM / DD / YYYY 12 / 31 / 2010
Mailing Address Employee #xx6267 50 Beale Street		Transaction ID: SA11AI.11501
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 80.00
Name of Employer Blue Shield of CA	Occupation Employee	Payroll contribution per cycle \$40.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 520.00	

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)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 57 / 71
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
BLUE SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Deborah Smith

Mailing Address 50 Beale Street

City State Zip Code
San Francisco CA 94105

FEC ID number of contributing federal political committee. **C**

Name of Employer Blue Shield of California Occupation employee

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 429.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 1 0

Transaction ID: SA11AI.11502

Amount of Each Receipt this Period
33.00

Payroll contribution per cycle \$16.50

B.

Full Name (Last, First, Middle Initial)
Kathleen Solorio

Mailing Address emp xx2408
50 Beale Street

City State Zip Code
San Francisco CA 94105

FEC ID number of contributing federal political committee. **C**

Name of Employer Blue Shield of California Occupation employee

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 1 0

Transaction ID: SA11AI.11503

Amount of Each Receipt this Period
20.00

Payroll contribution per cycle \$10.00

C.

Full Name (Last, First, Middle Initial)
Richard Soto

Mailing Address Employee #xx3026
50 Beale St.,

City State Zip Code
San Francisco CA 94105

FEC ID number of contributing federal political committee. **C**

Name of Employer Blue Shield of CA Occupation Employee

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 1 0

Transaction ID: SA11AI.11504

Amount of Each Receipt this Period
20.00

Payroll contribution per cycle \$10.00

SUBTOTAL of Receipts This Page (optional) ► **73.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 58 / 71
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
BLUE SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) Robert Spector		Date of Receipt
	Mailing Address emp xx4420, 50 Beale Street		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 2 / 3 1 / 2 0 1 0
	City	State	Zip Code
	San Francisco	CA	94105
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.11505
Name of Employer Blue Shield		Occupation employee	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 641.34	<input type="text"/> 50.76
			Payroll contribution per cycle \$25.38

B.	Full Name (Last, First, Middle Initial) Catherine Spicer		Date of Receipt
	Mailing Address Employee #xx1303 50 Beale St.,		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 2 / 3 1 / 2 0 1 0
	City	State	Zip Code
	San Francisco	CA	94105
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.11506
Name of Employer Blue Shield of CA		Occupation Employee	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 260.00	<input type="text"/> 20.00
			Payroll contribution per cycle \$10.00

C.	Full Name (Last, First, Middle Initial) Nancy Sproull		Date of Receipt
	Mailing Address emp xx2910, 50 Beale Street		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 2 / 3 1 / 2 0 1 0
	City	State	Zip Code
	San Francisco	CA	94105
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.11507
Name of Employer Blue Shield		Occupation employee	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 260.00	<input type="text"/> 20.00
			Payroll contribution per cycle \$10.00

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 90.76
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 59 / 71
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
BLUE SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
Nancy Stalker

Mailing Address emp xx6479
50 Beale Street

City San Francisco State CA Zip Code 94105

FEC ID number of contributing federal political committee. **C**

Name of Employer Blue Shield of California Occupation Vice President, Pharmacy Services

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 780.00

Date of Receipt MM / DD / YYYY
12 / 31 / 2010

Transaction ID: SA11AI.11508

Amount of Each Receipt this Period 60.00

Payroll contribution per cycle \$30.00

B. Full Name (Last, First, Middle Initial)
Robert F. Stephenson

Mailing Address emp xx2257
50 Beale Street

City San Francisco State CA Zip Code 94105

FEC ID number of contributing federal political committee. **C**

Name of Employer Blue Shield of California Occupation Employee

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt MM / DD / YYYY
12 / 31 / 2010

Transaction ID: SA11AI.11509

Amount of Each Receipt this Period 20.00

Payroll contribution per cycle \$10.00

C. Full Name (Last, First, Middle Initial)
Susan Stephenson

Mailing Address emp xx9942, 50 Beale Street

City San Francisco State CA Zip Code 94105

FEC ID number of contributing federal political committee. **C**

Name of Employer Blue Shield Occupation employee

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt MM / DD / YYYY
12 / 31 / 2010

Transaction ID: SA11AI.11510

Amount of Each Receipt this Period 20.00

Payroll contribution per cycle \$10.00

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) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 60 / 71
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
BLUE SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) Mary C StJohn		Date of Receipt
	Mailing Address 50 Beale St		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	San Francisco	CA	94105
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.11511
Name of Employer Blue Shield of CA		Occupation Employee	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 50.00
		<input type="text"/> 475.00	Payroll contribution per cycle \$25.00

B.	Full Name (Last, First, Middle Initial) Kimberly Streit		Date of Receipt
	Mailing Address emp xx5254 50 Beale Street		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	San Francisco	CA	94105
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.11513
Name of Employer Blue Shield of California		Occupation employee	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 50.00
		<input type="text"/> 650.00	Payroll contribution per cycle \$25.00

C.	Full Name (Last, First, Middle Initial) Malcolm Strohson Jr.		Date of Receipt
	Mailing Address 50 Beale Street		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	San Francisco	CA	94105
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.11514
Name of Employer Blue Shield of California		Occupation employee # xx5599	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 45.00
		<input type="text"/> 585.00	Payroll contribution per cycle \$22.50

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 145.00
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 61 / 71
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
BLUE SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
 Douglas Sturnick

Mailing Address emp xx1996
 50 Beale Street

City State Zip Code
 San Francisco CA 94105

FEC ID number of contributing federal political committee. **C**

Name of Employer Blue Shield of California Occupation Employee

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 650.00

Date of Receipt MM / DD / YYYY
 12 / 31 / 2010

Transaction ID: SA11AI.11515

Amount of Each Receipt this Period 50.00

Payroll contribution per cycle \$25.00

B. Full Name (Last, First, Middle Initial)
 Preddis Sullivan

Mailing Address emp xx5476
 50 Beale Street

City State Zip Code
 San Francisco CA 94105

FEC ID number of contributing federal political committee. **C**

Name of Employer Blue Shield of California Occupation employee

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 650.00

Date of Receipt MM / DD / YYYY
 12 / 31 / 2010

Transaction ID: SA11AI.11516

Amount of Each Receipt this Period 50.00

Payroll contribution per cycle \$25.00

C. Full Name (Last, First, Middle Initial)
 Lyle Swallow

Mailing Address emp xx8612
 50 Beale Street

City State Zip Code
 San Francisco CA 94105

FEC ID number of contributing federal political committee. **C**

Name of Employer Blue Shield of California Occupation Counsel

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1950.00

Date of Receipt MM / DD / YYYY
 12 / 31 / 2010

Transaction ID: SA11AI.11517

Amount of Each Receipt this Period 150.00

Payroll contribution per cycle \$75.00

SUBTOTAL of Receipts This Page (optional) ▶ **250.00**

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

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

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

FOR LINE NUMBER: PAGE 62 / 71
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
BLUE SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
 Yvonne Tatsuno
 Mailing Address Employee #xx6843
 50 Beale St.,
 City San Francisco State CA Zip Code 94105
 Date of Receipt 12 / 31 / 2010
Transaction ID: SA11AI.11518
 Amount of Each Receipt this Period 45.00
 Payroll contribution per cycle \$22.50
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Blue Shield of CA Occupation Employee
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 585.00

B. Full Name (Last, First, Middle Initial)
 James Taylor
 Mailing Address emp xx2237, 50 Beale Street
 City San Francisco State CA Zip Code 94105
 Date of Receipt 12 / 31 / 2010
Transaction ID: SA11AI.11519
 Amount of Each Receipt this Period 20.00
 Payroll contribution per cycle \$10.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Blue Shield Occupation employee
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

C. Full Name (Last, First, Middle Initial)
 Eric Terndrup
 Mailing Address emp xx4199
 50 Beale St.
 City San Francisco State CA Zip Code 94105
 Date of Receipt 12 / 31 / 2010
Transaction ID: SA11AI.11520
 Amount of Each Receipt this Period 60.86
 Payroll contribution per cycle \$30.43
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Blue Shield of California Occupation Employee
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 786.98

SUBTOTAL of Receipts This Page (optional) ▶ **125.86**
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER: PAGE 63 / 71
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
BLUE SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
 Ryan Thompson
 Mailing Address emp xx4592, 50 Beale Street
 City San Francisco State CA Zip Code 94105
 Date of Receipt 12 / 31 / 2010
Transaction ID: SA11AI.11522
 Amount of Each Receipt this Period 30.00
 Payroll contribution per cycle \$15.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Blue Shield Occupation employee
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date 390.00

B. Full Name (Last, First, Middle Initial)
 Phyllis Thrush
 Mailing Address Employee #xx6787
 50 Beale St.,
 City San Francisco State CA Zip Code 94105
 Date of Receipt 12 / 31 / 2010
Transaction ID: SA11AI.11523
 Amount of Each Receipt this Period 60.00
 Payroll contribution per cycle \$30.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Blue Shield of CA Occupation Employee
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date 720.00

C. Full Name (Last, First, Middle Initial)
 Joanne Trenam
 Mailing Address emp xx0511, 50 Beale Street
 City San Francisco State CA Zip Code 94105
 Date of Receipt 12 / 31 / 2010
Transaction ID: SA11AI.11525
 Amount of Each Receipt this Period 20.00
 Payroll contribution per cycle \$10.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Blue Shield Occupation employee
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date 260.00

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) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 64 / 71
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
BLUE SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) Margaret Trevor	Date of Receipt MM / DD / YYYY 12 / 31 / 2010
	Mailing Address emp xx5606 50 Beale Street	Transaction ID: SA11AI.11526
	City San Francisco State CA Zip Code 94105	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	Payroll contribution per cycle \$25.00
	Name of Employer Blue Shield of California Occupation employee Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 650.00	

B.	Full Name (Last, First, Middle Initial) Ernest Valente	Date of Receipt MM / DD / YYYY 12 / 31 / 2010
	Mailing Address Employee #xx3862 50 Beale St.,	Transaction ID: SA11AI.11528
	City San Francisco State CA Zip Code 94105	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	Payroll contribution per cycle \$25.00
	Name of Employer Blue Shield of CA Occupation Employee Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 650.00	

C.	Full Name (Last, First, Middle Initial) Christine Vogt-Wingerath	Date of Receipt MM / DD / YYYY 12 / 31 / 2010
	Mailing Address Employee #xx7001 50 Beale St.,	Transaction ID: SA11AI.11530
	City San Francisco State CA Zip Code 94105	Amount of Each Receipt this Period 30.00
	FEC ID number of contributing federal political committee. C	Payroll contribution per cycle \$15.00
	Name of Employer Blue Shield of CA Occupation Employee Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 390.00	

SUBTOTAL of Receipts This Page (optional)	130.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: PAGE 65 / 71
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
BLUE SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
Sonya Wade

Mailing Address emp xx3639
50 Beale Street

City State Zip Code
San Francisco CA 94105

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Blue Shield of California employee

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
255.00

Date of Receipt
MM / DD / YYYY
12 / 31 / 2010

Transaction ID: SA11AI.11532

Amount of Each Receipt this Period
30.00

Payroll contribution per cycle \$15.00

B. Full Name (Last, First, Middle Initial)
Robert Wadsworth

Mailing Address emp x8560
50 Beale Street

City State Zip Code
San Francisco CA 94105

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Blue Shield of California Employee

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
780.00

Date of Receipt
MM / DD / YYYY
12 / 31 / 2010

Transaction ID: SA11AI.11533

Amount of Each Receipt this Period
60.00

Payroll contribution per cycle \$30.00

C. Full Name (Last, First, Middle Initial)
Diane Watts

Mailing Address emp xx3379, 50 Beale Street

City State Zip Code
San Francisco CA 94105

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Blue Shield employee

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
520.00

Date of Receipt
MM / DD / YYYY
12 / 31 / 2010

Transaction ID: SA11AI.11534

Amount of Each Receipt this Period
40.00

Payroll contribution per cycle \$20.00

SUBTOTAL of Receipts This Page (optional) ► **130.00**

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

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

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

FOR LINE NUMBER: PAGE 66 / 71
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
BLUE SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mark Weideman

Mailing Address emp xx4691
50 Beale St

City San Francisco State CA Zip Code 94105

FEC ID number of contributing federal political committee. **C**

Name of Employer Blue Shield Occupation employee

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1440.00

Date of Receipt MM / DD / YYYY
12 / 31 / 2010

Transaction ID: SA11AI.11535

Amount of Each Receipt this Period 120.00

Payroll contribution per cycle \$60.00

B. Full Name (Last, First, Middle Initial)
Bonnie Wells

Mailing Address emp xx3298
50 Beale Street

City San Francisco State CA Zip Code 94105

FEC ID number of contributing federal political committee. **C**

Name of Employer Blue Shield of California Occupation Employee

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 390.00

Date of Receipt MM / DD / YYYY
12 / 31 / 2010

Transaction ID: SA11AI.11536

Amount of Each Receipt this Period 30.00

Payroll contribution per cycle \$15.00

C. Full Name (Last, First, Middle Initial)
Kim Westfall

Mailing Address emp xx5515
50 Beale Street

City San Francisco State CA Zip Code 94105

FEC ID number of contributing federal political committee. **C**

Name of Employer Blue Shield of California Occupation employee

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt MM / DD / YYYY
12 / 31 / 2010

Transaction ID: SA11AI.11538

Amount of Each Receipt this Period 20.00

Payroll contribution per cycle \$10.00

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)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 67 / 71

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
BLUE SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Jayne Whitelaw

Mailing Address Employee #xx5978
50 Beale St.,

City State Zip Code
San Francisco CA 94105

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Blue Shield of CA Employee

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼
650.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 1 0

Transaction ID: SA11AI.11539

Amount of Each Receipt this Period

50.00

Payroll contribution per cycle \$25.00

B.

Full Name (Last, First, Middle Initial)
Evelyn Whitfield

Mailing Address Employee #xx5718
50 Beale St.,

City State Zip Code
San Francisco CA 94105

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Blue Shield of CA Employee

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼
607.50

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 1 0

Transaction ID: SA11AI.11540

Amount of Each Receipt this Period

67.50

Payroll contribution per cycle \$22.50

C.

Full Name (Last, First, Middle Initial)
Noel Whitman

Mailing Address 50 Beale Street

City State Zip Code
San Francisco CA 94105

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Blue Shield fo California employee # xx4963

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼
585.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 1 0

Transaction ID: SA11AI.11541

Amount of Each Receipt this Period

45.00

Payroll contribution per cycle \$22.50

SUBTOTAL of Receipts This Page (optional)

162.50

TOTAL This Period (last page this line number only)

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 68 / 71
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
BLUE SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) Ms Janet D. Widmann	Date of Receipt M M / D D / Y Y Y Y 1 2 / 3 1 / 2 0 1 0
	Mailing Address emp xx1756 50 Beale Street	Transaction ID: SA11AI.11542
	City San Francisco State CA Zip Code 94105	Amount of Each Receipt this Period 60.00
	FEC ID number of contributing federal political committee. C	Payroll contribution per cycle \$30.00
	Name of Employer Blue Shield of California Occupation Employee Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 780.00	

B.	Full Name (Last, First, Middle Initial) James Williams	Date of Receipt M M / D D / Y Y Y Y 1 2 / 3 1 / 2 0 1 0
	Mailing Address Employee #xx6235 50 Beale St.,	Transaction ID: SA11AI.11544
	City San Francisco State CA Zip Code 94105	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. C	Payroll contribution per cycle \$10.00
	Name of Employer Blue Shield of CA Occupation Employee Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 260.00	

C.	Full Name (Last, First, Middle Initial) Jered Wilson	Date of Receipt M M / D D / Y Y Y Y 1 2 / 3 1 / 2 0 1 0
	Mailing Address 50 Beale Street	Transaction ID: SA11AI.11545
	City San Francisco State CA Zip Code 94105	Amount of Each Receipt this Period 45.00
	FEC ID number of contributing federal political committee. C	Payroll contribution per cycle \$22.50
	Name of Employer Blue Shield of California Occupation employee # xx5412 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 585.00	

SUBTOTAL of Receipts This Page (optional)	125.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: PAGE 69 / 71
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
BLUE SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
Amy Yao

Mailing Address 50 Beale Street

City State Zip Code
San Francisco CA 94105

FEC ID number of contributing federal political committee. **C**

Name of Employer Blue Shield of California Occupation employee #xx5363

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 780.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 1 0

Transaction ID: SA11AI.11549

Amount of Each Receipt this Period
60.00

Payroll contribution per cycle \$30.00

B. Full Name (Last, First, Middle Initial)
John S. Yao

Mailing Address 50 Beale Street

City State Zip Code
San Francisco CA 94105

FEC ID number of contributing federal political committee. **C**

Name of Employer Blue Shield of California Occupation employee # xx1926

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 585.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 1 0

Transaction ID: SA11AI.11550

Amount of Each Receipt this Period
45.00

Payroll contribution per cycle \$22.50

SUBTOTAL of Receipts This Page (optional) ► **105.00**

TOTAL This Period (last page this line number only) ► **9150.90**

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
BLUE SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) AMERICA'S NEW MAJORITY	Transaction ID: SB23.11372 Date of Disbursement 12 / 28 / 2010
	Mailing Address 228 S. WASHINGTON STREET SUITE 115	Amount of Each Disbursement this Period 5000.00
	City ALEXANDRIA State VA Zip Code 22314	
	Purpose of Disbursement 2010 Contribution	Category/ Type
	Candidate Name AMERICA'S NEW MAJORITY	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 19	Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) BLUEPAC - BCBSA PAC	Transaction ID: SB23.11370 Date of Disbursement 12 / 28 / 2010
	Mailing Address 1310 G STREET NW	Amount of Each Disbursement this Period 2250.00
	City WASHINGTON State DC Zip Code 20005	
	Purpose of Disbursement 2010 PAC Contribution	Category/ Type
	Candidate Name BLUEPAC - BCBSA PAC	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) SENATE MAJORITY FUND	Transaction ID: SB23.11374 Date of Disbursement 11 / 24 / 2010
	Mailing Address P.O. Box 32025	Amount of Each Disbursement this Period 1000.00
	City Phoenix State AZ Zip Code 85064	
	Purpose of Disbursement 2010 Contribution	Category/ Type
	Candidate Name SENATE MAJORITY FUND	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	8250.00
TOTAL This Period (last page this line number only)	8250.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
BLUE SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) Bank, Fees	Transaction ID: SB29.11554 Date of Disbursement
	Mailing Address 345 Montgomery Street	<input type="text" value="1"/> ^M <input type="text" value="2"/> ^M / <input type="text" value="1"/> ^D <input type="text" value="5"/> ^D / <input type="text" value="2"/> ^Y <input type="text" value="0"/> ^Y <input type="text" value="1"/> ^Y <input type="text" value="0"/> ^Y
	City San Francisco State CA Zip Code 94101	Amount of Each Disbursement this Period
	Purpose of Disbursement Account analysis fee	<input type="text" value="33.23"/>
	Candidate Name	<input type="text"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Category/Type
	State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="33.23"/>
TOTAL This Period (last page this line number only)	<input type="text" value="33.23"/>