FED EX LETTER: TODAY'S DATE: 7/20/99

FROM: Linda Melusky
Capital Blue Cross
(717) 541-6135
Government Affairs Department
Mail Drop: 2531
Cost Center: 00302

TO: Public Records Office (202) 219-3420
Federal Election Commission
999 E. Street, N.W.
Washington, DC 20463

STANDARD OVERNIGHT DELIVERY

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

RECEIVED
FEDERAL ELECTION
COMMISSION MAIL ROOM

JUL 22 9 45 AM '99

USE FEC MAILING LABEL OR TYPE OR PRINT

1. NAME OF COMMITTEE (in full)
BluePAC (Capital, Northeastern, Independence, and Western Pennsylvania Blue Cross Plans

ADDRESS (number and street) ☐ Check if different than previously reported
Pennsylvania Blue Cross Plans
c/o Linda Melusky

CITY, STATE and ZIP CODE
2500 Elmerton Avenue
Harrisburg, PA 17177

2. FEC IDENTIFICATION NUMBER
C.00270967

3. ☒ This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

4. TYPE OF REPORT

(a) ☐ April 15 Quarterly Report
☐ July 15 Quarterly Report
☐ October 15 Quarterly Report
☐ January 31 Year End Report
☒ July 31 Mid Year Report (Non-election Year Only)
☐ Termination Report

Monthly Report Due On:
☐ February 20 ☐ June 20 ☐ October 20
☐ March 20 ☐ July 20 ☐ November 20
☐ April 20 ☐ August 20 ☐ December 20
☐ May 20 ☐ September 20 ☐ January 31

☐ 12-Day Pre-Election Report for the _____ _____ (Type of Election)
election on _____ ___ in the State of _____

☐ 30-Day Post-Election Report following the General Election
on _____ in the State of _____

(b) Is this Report an Amendment? ☐ YES ☒ NO

SUMMARY	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period 01/01/1999 through 06/30/1999		
6. (a) Cash on Hand January 1, 19____		$ 14,637.64
(b) Cash on Hand at Beginning of Reporting Period	$ 14,637.64	
(c) Total Receipts (from Line 19)	$ 53,956.67	$ 53,956.67
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	$ 68,594.31	$ 68,594.31
7. Total Disbursements (from Line 30)	$ 60,950.00	$ 60,950.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	$ 7,644.31	$ 7,644.31
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	

For further information contact:
Federal Election Commission
999 E Street, NW
Washington, DC 20463
Toll Free 800-424-9530
Local 202-694-1100

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
Linda Melusky

Signature of Treasurer
Linda Melusky

Date

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

FEC FORM 3X
(revised 8/98)

FE8AN121

DETAILED SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS
PAGE 2, FEC FORM 3X

(revised 1/1/91)

NAME OF COMMITTEE: BluePAC

REPORT COVERING PERIOD FROM 01/01/1999 TO: 06/30/1999

	COLUMN A Total This Period	COLUMN B Calendar Year	
I. Receipts			
11. Contributions (other than loans) From:			
a. Individual/Persons Other Than Political Committees			
i. Itemized (use Schedule A)	21,347.67	21,347.67	11(a)(i)
ii. Unitemized	32,609.00	32,609.00	11(a)(ii)
iii. Total (add i and ii) ➤	53,956.67	53,956.67	11(a)(iii)
b. Political Party Committees			11(b)
c. Other Political Committees (such as PACs)			11(c)
d. Total Contributions (add a iii, b and c) ➤	53,956.67	53,956.67	11(d)
12. Transfers From Affiliated/Other Party Committees			12
13. All Loans Received			13
14. Loan Repayments Received			14
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)			15
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees			16
17. Other Federal Receipts (Dividends, Interest, etc.)			17
18. Transfers from Nonfederal Account for Joint Activity			18
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) ➤	53,956.67	53,956.67	19
20. Total Federal Receipts (subtract line 18 from line 19) ➤	53,956.67	53,956.67	20
II. Disbursements			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)			
i. Federal Share			21(a)(i)
ii. Non-Federal Share			21(a)(ii)
b. Other Federal Operating Expenditures			21(b)
c. Total Operating Expenditures (add a i, a ii, and b) ➤			21(c)
22. Transfers to Affiliated/Other Party Committees	3,000.00	3,000.00	22
23. Contributions to Federal Candidates/Committees and Other Political Committees	2,200.00	2,200.00	23
24. Independent Expenditures (use Schedule E)			24
25. Coordinated Expenditures Made by Party Committees [2 U.S.C. 441a(d)] (use Schedule F)			25
26. Loan Repayments Made			26
27. Loans Made			27
28. Refunds of Contributions To:			
a. Individuals/Persons Other Than Political Committees			28(a)
b. Political Party Committees			28(b)
c. Other Political Committees (such as PACs)			28(c)
d. Total Contribution Refunds (add a, b and c) ➤			28(d)
29. Other Disbursements	55,750.00	55,750.00	29
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) ➤	60,950.00	60,950.00	30
31. Total Federal Disbursements (subtract line 21 a ii from line 30) ➤	60,950.00	60,950.00	31
III. Net Contributions/Operating Expenditures			
32. Total Contributions (other than loans)(from line 11d)	53,956.67	53,956.67	32
33. Total Contribution Refunds (from line 28d)	0.00	0.00	33
34. Net Contributions (other than loans)(subtract line 33 from 32)	53,956.67	53,956.67	34
35. Total Federal Operating Expenditures (add 21 a i and 21 b) ➤	0.00	0.00	35
36. Offsets to Operating Expenditures (from line 15)	0.00	0.00	36
37. Net Operating Expenditures (subtract line 36 from 35) ➤	0.00	0.00	37

SCHEDULE A **ITEMIZED RECEIPTS**

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

PAGE 1 OF 8

FOR LINE NUMBER 11.a .1

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NAME OF COMMITTEE (In Full)

> BluePAC Pennsylvania Blue Cross Plans PAC

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period
A. Butler, Christopher 1 Brampton Road Malvern, Pa 19355 Receipt For: Primary General Other (specify):	Independence Blue Cross Occupation: Senior Vice President Aggregate Year-to-Date > $ 520.00		$ 520.00 ($40 bi-weekly)
B. Daddis, John 8 Glenlake Drive Medford, NJ 08055 Receipt For: Primary General Other (specify):	Independence Blue Cross Occupation: Senior Vice President Aggregate Year-to-Date > $ 500.11		$ 500.11 ($38.47 bi-weekly)
C. Dilsona, G. Fred Jr. 837 Heather Lane Bryn Mawr, Pa 19010 Receipt For: Primary General Other (specify):	Independence Blue Cross Occupation: President Aggregate Year-to-Date > $ 1,750.06		$ 1,750.06 ($134.62 bi-weekly)
D. Fiscis, Robert J. 8 Summer Hill Lane Medford, NJ 08055 Receipt For: Primary General Other (specify):	Independence Blue Cross Occupation: Senior Vice President Aggregate Year-to-Date > $ 650.00		$ 650.00 ($50 bi-weekly)
E. Foos, John G. 1016 Lorien Drive Gwynedd Valley, Pa. 19437 Receipt For: Primary General Other (specify):	Independence Blue Cross Occupation: Chief Financial Officer Aggregate Year-to-Date > $ 780.00		$ 780.00 ($60 bi-weekly)
F. Cashman, Christopher 7320 Hola Road Philadelphia, PA 19128 Receipt For: Primary General Other (specify):	Independence Blue Cross Occupation: Sr VP Corp. & Public Affairs Aggregate Year-to-Date > $ 1,118.00		$ 1,118.00 ($86 bi-weekly)
G. Hobson, Michael 31 Oakland Road Wayne, PA 19087 Receipt For: Primary General Other (specify):	Independence Blue Cross Occupation: Acct. Exec. KHP East Aggregate Year-to-Date > $ 492.00		$ 492.00 ($38.50 bi-weekly)

SUBTOTAL of Receipts This Page (optional) > $ 5,810.17

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

SCHEDULE A ITEMIZED RECEIPTS

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

PAGE 2 OF 8

FOR LINE NUMBER 11.a .1

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NAME OF COMMITTEE (In Full)

> BluePAC Pennsylvania Blue Cross Plans PAC

A. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period
Manderalas, James 102 Hendrickson Ave Beverly, NJ 08010	Independence Blue Cross Senior Director		$ 240.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $ 240.00		($20 bi-weekly)
B. Full Name, Mailing Address and ZIP Code	**Name of Employer / Occupation**	**Date (month, day, year) Payroll Deduction**	**Amount of Each Receipt this Period**
McMillen, Mary Ellen 6487 Grouse Drive Harrisburg, Pa 17111	Independence Blue Cross Vice President		$ 500.50
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $ 500.50		($38.50 bi-weekly)
C. Full Name, Mailing Address and ZIP Code	**Name of Employer / Occupation**	**Date (month, day, year) Payroll Deduction**	**Amount of Each Receipt this Period**
Pappalardo, Thomas 240 Tall Pines Drive East Bewall, NJ 08080	Independence Blue Cross Senior Vice President		$ 520.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $ 520.00		($40 bi-weekly)
D. Full Name, Mailing Address and ZIP Code	**Name of Employer / Occupation**	**Date (month, day, year) Payroll Deduction**	**Amount of Each Receipt this Period**
Pedriani, Daniel 1604 Schoolhouse Lane Gwynedd Valley, Pa 19437	Independence Blue Cross Senior Vice President		$ 780.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $ 780.00		($60 bi-weekly)
E. Full Name, Mailing Address and ZIP Code	**Name of Employer / Occupation**	**Date (month, day, year) Payroll Deduction**	**Amount of Each Receipt this Period**
Brennan, Martin 1 Tanglewood Circle Ross Valley, PA 19086	Independence Blue Cross Chief Info. Officer		$ 520.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $ 520.00		($40 bi-weekly)
F. Full Name, Mailing Address and ZIP Code	**Name of Employer / Occupation**	**Date (month, day, year) Payroll Deduction**	**Amount of Each Receipt this Period**
Farley, Kathryn 315 Valley Forge Road Devon, PA 19333	Independence Blue Cross Vice President		$ 455.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $ 455.00		($35 bi-weekly)
G. Full Name, Mailing Address and ZIP Code	**Name of Employer / Occupation**	**Date (month, day, year) Payroll Deduction**	**Amount of Each Receipt this Period**
Frick, Joseph A. 7 Moore Circle Media, PA 19063	Independence Blue Cross Vice President		$ 520.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $ 520.00		($40 bi-weekly)

SUBTOTAL of Receipts This Page (optional) ..... > $ 3,585.50

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

SCHEDULE A **ITEMIZED RECEIPTS**

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

PAGE 3 OF 8

FOR LINE NUMBER 11.a 1

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NAME OF COMMITTEE (In Full)

> BluePAC Pennsylvania Blue Cross Plans PAC

Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Green, Michael A. 617 Brights Lane Pennlyn, PA 19422	Independence Blue Cross	Payroll Deduction	$ 650.00
Receipt For: Primary General	Occupation: Vice President		
Other (specify):	Aggregate Year-to-Date > $ 650.00		($50 bi-weekly)
Zamzow, John 1150 Grandview Terrace Radnor, Pa 19087	Independence Blue Cross	Payroll Deduction	$ 455.00
Receipt For: Primary General	Occupation: Senior Vice President		
Other (specify):	Aggregate Year-to-Date > $ 455.00		($35 bi-weekly)
Lister, Kathleen 2029 Delancey Place Philadelphia, PA 19103	Independence Blue Cross	Payroll Deduction	$ 650.00
Receipt For: Primary General	Occupation: Vice President		
Other (specify):	Aggregate Year-to-Date > $ 650.00		($50 bi-weekly)
Nolan, Joseph F. 2938 Sunset Avenue Norristown, PA 19403	Independence Blue Cross	Payroll Deduction	$ 390.00
Receipt For: Primary General	Occupation: VP - Controller		
Other (specify):	Aggregate Year-to-Date > $ 390.00		($30 bi-weekly)
Udvarhelyi, Stephen M.D. 1085 Wyndtree Lane Malvern, PA 19355	Independence Blue Cross	Payroll Deduction	$ 515.00
Receipt For: Primary General	Occupation: Sr. VP & Chief Med. Off.		
Other (specify):	Aggregate Year-to-Date > $ 515.00		($38 bi-weekly)
Riggins, Stacy L. 717 W. Fisher Avenue Philadelphia, PA 19120	Independence Blue Cross	Payroll Deduction	$ 260.00
Receipt For: Primary General	Occupation: Retiree Consultant		
Other (specify):	Aggregate Year-to-Date > $ 260.00		($20 bi-weekly)
Rhodes, James H 5105 N Park Drive, Suite 1401 Pennsauken, NJ 08019	Independence Blue Cross	Payroll Deduction	$ 240.00
Receipt For: Primary General	Occupation: Govt Relations Specialist		
Other (specify):	Aggregate Year-to-Date > $ 240.00		($20 bi-weekly)

SUBTOTAL of Receipts This Page (optional)	>	$ 3,160.00
TOTAL This Period (last page this line number only)	>	

SCHEDULE A **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER 11.a .L

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NAME OF COMMITTEE (In Full)

> BluePAC Pennsylvania Blue Cross Plans PAC

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period
A. Boyer, Donna L. 113 Red Stone Ridge Delran, NJ 08075	Independence Blue Cross Director- Sales		$ 260.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $ 260.00		($20 bi-weekly)
B. Brown, Royal E. 1420 S. 16th Street Philadelphia, PA 19146	Independence Blue Cross Senior Director		$ 260.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $ 260.00		($20 bi-weekly)
C. Cocco, Bonnie 710 Duke Drive Wenonah, NJ 08090	Independence Blue Cross Director		$ 208.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $ 208.00		($16 bi-weekly)
D. Falco, James J. 33 Farmhouse Lane Voorhees, NJ 08043	Independence Blue Cross Director		
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $		($20 bi-weekly)
E. Gregus, Barbara J. 210 Fawn Drive Harleysville, PA 19438	Independence Blue Cross Manager		$ 260.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $ 260.00		($20 bi-weekly)
F. Henry, Joseph P. 237 Leona Avenue Huntington Valley, PA 19006	Independence Blue Cross Director		$ 258.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $ 258.00		($18 bi-weekly)
G. Roberts, Michael Kevin 932 Dogwood Lane Collegeville, PA 19426	Independence Blue Cross Broker Executive		$ 260.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $ 260.00		($20 bi-weekly)

SUBTOTAL of Receipts This Page (optional)	>	$ 1,508.00
TOTAL This Period (last page this line number only)	>	

SCHEDULE A **ITEMIZED RECEIPTS**

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

PAGE 5 OF 6

FOR LINE NUMBER 11.a .i.

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NAME OF COMMITTEE (In Full)

> BluePAC Pennsylvania Blue Cross Plans PAC

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period
A. Douglas, John 105 Cascades Court Blue Bell, PA 19422 Receipt For: Primary General Other (specify):	Independence Blue Cross VP Actuarial Services Aggregate Year-to-Date > $ 260.00		$ 260.00 ($20 bi-weekly)
B. Eskridge, Karen W. 114A East Providence Road Yeadon, PA 19050 Receipt For: Primary General Other (specify):	Independence Blue Cross Senior Director Aggregate Year-to-Date > $ 208.00		$ 208.00 ($16 bi-weekly)
C. Heggett, William F. 333 Elm Avenue Haddonfield, NJ 08033 Receipt For: Primary General Other (specify):	Independence Blue Cross Vice President Aggregate Year-to-Date > $ 325.00		$ 325.00 ($25 bi-weekly)
D. Lessin, Karen 308 Golf Hills Road Havertown, PA 19083 Receipt For: Primary General Other (specify):	Independence Blue Cross Director FEP Admin Aggregate Year-to-Date > $ 248.00		$ 248.00 ($20 bi-weekly)
E. Park, Rosemary 210 Carlton Avenue Westmont, NJ 08108 Receipt For: Primary General Other (specify):	Independence Blue Cross Senior Vice President Rating Aggregate Year-to-Date > $ 520.00		$ 520.00 ($20 bi-weekly)
F. Picciolo, Vincent J. 14 Fisler Drive Clayton, NJ 08312 Receipt For: Primary General Other (specify):	Independence Blue Cross Vice President Aggregate Year-to-Date > $ 234.00		$ 234.00 ($18 bi-weekly)
G. Hughes, Robert P. 904 Westdale Avenue Swarthmore, PA 19081 Receipt For: Primary General Other (specify):	Independence Blue Cross Senior Director Aggregate Year-to-Date > $ 260.00		$ 260.00 ($20 bi-weekly)

SUBTOTAL of Receipts This Page (optional)	>	$ 2,155.00
TOTAL This Period (last page this line number only)	>	

SCHEDULE A **ITEMIZED RECEIPTS**

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

PAGE 6 OF 8

FOR LINE NUMBER 11.a. i.

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NAME OF COMMITTEE (In Full)

> BluePAC Pennsylvania Blue Cross Plans PAC

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period
Pearson MD, Vincent 108 Irick Road Mount Holly, NJ 08060	Independence Blue Cross Medical Director		$ 325.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $	325.00	($25 bi-weekly)
Carey, Leo M. 100 Mulberry Lane Media, PA 19063	Independence Blue Cross Vice President		$ 232.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $	232.00	($16 bi-weekly)
Herdman, Bruce 154 Quinton-Hancock's Road Salem, NJ 08079	Independence Blue Cross Vice President KHP East		$ 260.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $	260.00	($20 bi-weekly)
Reilley, Lawrence 1304 Fairbourne Ct Lansdale, PA 19446	Independence Blue Cross Vice President		$ 260.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $	260.00	($20 bi-weekly)
Vander Ela, Bruce N. 1404 Emory Road Wilmington, DE 19803	Independence Blue Cross VP Finance & Actuary		$ 260.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $	260.00	($20 bi-weekly)
Bright, Yvette 739 Weaklew Avenue Philadelphia, PA 19119	Independence Blue Cross VP-Physician Operations		$ 244.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $	244.00	($20 bi-weekly)
Gannon, George W. 1405 Springton Lane West Chester, PA 19380	Independence Blue Cross President Amerihealth		$ 240.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $	240.00	($20 bi-weekly)

SUBTOTAL of Receipts This Page (optional)	>	$ 1,811.00
TOTAL This Period (last page this line number only)	>	

SCHEDULE A **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER 11.a J.

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NAME OF COMMITTEE (In Full)

> BluePAC Pennsylvania Blue Cross Plans PAC

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period
Thompson, Eleanor 138 Daylesford Blvd Berwyn, PA 19312	Independence Blue Cross Deputy General Council		$ 300.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $	300.00	($6 bi-weekly)
Liskay, Donald J. 2509 Barnes Drive Moon Township, PA 15108	Independence Blue Cross Vice President		$ 260.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $	260.00	($20 bi-weekly)
Keefe, Katherine M. 319 Vassar Ave Swarthmore, PA 19081	Independence Blue Cross General Council		$ 208.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $	208.00	($16 bi-weekly)
McKeown, Robert A. 608 Bryn Mawr Avenue Haddonfield, NJ 08033-1113	Independence Blue Cross Senior VP		$ 600.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $	600.00	($50 bi-weekly)
Post, R. Scott 285 Stormfield Drive Harleysville, PA 19438	Independence Blue Cross Senior Director		$ 254.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $	254.00	($20 bi-weekly)
Markel, Robert 621 9th Street New Cumberland, PA 17070	Capital Blue Cross SR V.P. and Treasurer		$ 520.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $	520.00	($40 bi-weekly)
Mead, James 201 Hearth Road Camp Hill, PA 17011	Capital Blue Cross President		$ 650.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $	650.00	($50 bi-weekly)

SUBTOTAL	of Receipts This Page (optional) ..... >	$ 2,790.00
TOTAL	This Period (last page this line number only) ..... >	

SCHEDULE A **ITEMIZED RECEIPTS**

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

PAGE 8 OF 8

FOR LINE NUMBER 11.a .i.

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NAME OF COMMITTEE (in Full)

> BluePAC Pennsylvania Blue Cross Plans PAC

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period
Vanvalkenburg, Lee 2901 Rathton Road Camp Hill, PA 17011	Capital Blue Cross		$ 260.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation: Vice President-Corp Services		
	Aggregate Year-to-Date > $ 260.00		($20 bi-weekly)

B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period
Garood, Vincent 513 Mandy Lane Camp Hill, PA 17011	Capital Blue Cross		$ 260.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation: Mgr, Gov't Relations		
	Aggregate Year-to-Date > $ 260.00		($20 bi-weekly)

C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation		
	Aggregate Year-to-Date > $		

D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation		
	Aggregate Year-to-Date > $		

E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation		
	Aggregate Year-to-Date > $		

F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation		
	Aggregate Year-to-Date > $		

G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation		
	Aggregate Year-to-Date > $		

SUBTOTAL of Receipts This Page (optional)	>	$ 520.00
TOTAL This Period (last page this line number only)	>	$ 21,347.67

SCHEDULE A **ITEMIZED RECEIPTS**

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

PAGE 1 OF 1

FOR LINE NUMBER 1a

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NAME OF COMMITTEE (In Full)

> BluePAC Pennsylvania Blue Cross Plans PAC

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation		
	Aggregate Year-to-Date > $		
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period $ -
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation		
	Aggregate Year-to-Date > $	0.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period $ -
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation		
	Aggregate Year-to-Date > $	0.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period $ -
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation		
	Aggregate Year-to-Date > $	0.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period $ -
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation		
	Aggregate Year-to-Date > $	0.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period $ -
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation		
	Aggregate Year-to-Date > $	0.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period $ -
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation		
	Aggregate Year-to-Date > $	0.00	

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

SCHEDULE B	ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 1 OF 1 FOR LINE NUMBER 2 2

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NAME OF COMMITTEE (In Full)

> BluePAC Pennsylvania Blue Cross Plans PAC

	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
A. Full Name, Mailing Address and ZIP Code BluePAC/CarePAC c/o Brenda Larson Becker 1310 G Street, NW Washington, DC 20005	Contribution - State, Pa. Disbursement for: Primary General Other (specify)	02/16/1999 04/06/1999	$1,000.00 $2,000.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: Primary General Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: Primary General Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: Primary General Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: Primary General Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: Primary General Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: Primary General Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: Primary General Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: Primary General Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional) ..... >	$3,000.00
TOTAL This Period (last page this line number only) ..... >	$3,000.00

SCHEDULE B	ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 1 OF 1
			FOR LINE NUMBER 23

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NAME OF COMMITTEE (in Full)

> BluePAC Pennsylvania Blue Cross Plans PAC

A. Full Name, Mailing Address and ZIP Code Senforum 2000 1211 Locust Street, Suite 100 Philadelphia, PA 19107	Purpose of Disbursement Contribution - Senate Disbursement for: Primary [X] General Other (specify)	Date (month, day, year) 08/10/1999	Amount of Each Disbursement This Period $1,000.00
B. Full Name, Mailing Address and ZIP Code George W Bush Presidential Exploratory Committee P.O. Box 769 Harrisburg, PA 17108-0769	Purpose of Disbursement Contribution - Presidential Disbursement for: [X] Primary General Other (specify)	Date (month, day, year) 08/28/1999	Amount of Each Disbursement This Period $500.00
C. Full Name, Mailing Address and ZIP Code ChamberPAC 417 Walnut Street Harrisburg, PA 17101-1902	Purpose of Disbursement Contribution - State, Pa Disbursement for: Primary General Other (specify)	Date (month, day, year) 01/12/1999 01/29/1999	Amount of Each Disbursement This Period $50.00 $150.00
D. Full Name, Mailing Address and ZIP Code PennPAC c/o William R Sasso Stradley, Ronon, Stevens & Young, LLP 2600 One Commerce Square Philadelphia, PA 19103-7098	Purpose of Disbursement Contribution - State, Pa Disbursement for: Primary General Other (specify)	Date (month, day, year) 03/25/1999	Amount of Each Disbursement This Period $500.00
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: Primary General Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: Primary General Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: Primary General Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: Primary General Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: Primary General Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional) ..... >	$2,200.00
TOTAL This Period (last page this line number only) ..... >	$2,200.00

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER 2 B

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NAME OF COMMITTEE (In Full)

> BluePAC Pennsylvania Blue Cross Plans PAC

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Friends of Bill Adolph P.O. Box 545 Harrisburg, PA 17108	Contribution - State, Pa Disbursement for: Primary General Other (specify)	06/10/1999	$250.00
B. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
Friends of Bob Allen P.O. Box 545 Harrisburg, PA 17108	Contribution - State, Pa Disbursement for: Primary General Other (specify)	04/15/1999	$250.00
C. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
Armstrong for Senate Committee P.O. Box 545 Harrisburg, PA 17108	Contribution - State, Pa Disbursement for: Primary General Other (specify)	05/01/1999	$250.00
D. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
Friends of Mike Fisher Committee Attention: Carey Dunn 11 Stanwix Street, 15th Floor Pittsburgh, PA 15222	Contribution - State, Pa Disbursement for: Primary General Other (specify)	06/10/1999	$500.00
E. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
Friends of John Barley 192 Chestnut Grove Road Conestoga, PA 17516	Contribution - State, Pa Disbursement for: Primary General Other (specify)	02/15/1999 02/16/1999 06/24/1999	$500.00 $500.00 $500.00
F. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
Citizens for Bishop 2460 N. 59th Street Philadelphia, PA 19131	Contribution - State, Pa Disbursement for: Primary General Other (specify)	06/10/1999	$250.00
G. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
Friends of Lisa Boscola 548 N. New Street Bethlehem, PA 18018	Contribution - State, Pa Disbursement for: Primary General Other (specify)	01/26/1999	$250.00
H. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
Friends of Senator Brightbill P.O. Box 822 Lebanon, PA 17042	Contribution - State, Pa Disbursement for: Primary General Other (specify)	02/16/1999 02/19/1999	$300.00 $300.00
I. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
Committee to Elect Steve Brockens 2233 Spring Garden Street Philadelphia, PA 19130	Contribution - State, Pa Disbursement for: Primary General Other (specify)	01/29/1999 04/22/1999	$250.00 $500.00

SUBTOTAL of Disbursements This Page (optional) ..... > $4,800.00

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

SCHEDULE B	ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 2 OF 9
			FOR LINE NUMBER 29

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NAME OF COMMITTEE (in Full)

> BluePAC Pennsylvania Blue Cross Plans PAC

	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
A. Full Name, Mailing Address and ZIP Code Ray Burd Legislature Committee 222 Fulmer Road Spring Mount, PA 19478	Contribution - State, Pa Disbursement for: Primary General Other (specify)	05/13/1999	$250.00
B. Full Name, Mailing Address and ZIP Code Butkovitz for Legislature 1118 Unruh Avenue Philadephia, PA 19111	Contribution - State, Pa Disbursement for: Primary General Other (specify)	06/10/1999	$250.00
C. Full Name, Mailing Address and ZIP Code Citizens for Ron Buxton P.O. Box 553 Harrisburg, PA 17108	Contribution - State, Pa Disbursement for: Primary General Other (specify)	03/01/1999 06/08/1999	$200.00 $200.00
D. Full Name, Mailing Address and ZIP Code Friends of Mario Civera 4501 Dermong Road Drexel Hill, PA 19026	Contribution - State, Pa Disbursement for: Primary General Other (specify)	05/20/1999	$250.00
E. Full Name, Mailing Address and ZIP Code Corman for Senate Committee P.O. Box 545 Harrisburg, PA 17108	Contribution - State, Pa Disbursement for: Primary General Other (specify)	04/29/1999 06/24/1999	$250.00 $175.00
F. Full Name, Mailing Address and ZIP Code Reelect Cornell Committee 256 East Montgomery Avenue Harboro, PA 19040	Contribution - State, Pa Disbursement for: Primary General Other (specify)	02/16/1999	$250.00
G. Full Name, Mailing Address and ZIP Code Jay Costa for State Senate 314 Newport Road Pittsburgh, PA 15221	Contribution - State, Pa Disbursement for: Primary General Other (specify)	03/01/1999	$250.00
H. Full Name, Mailing Address and ZIP Code Jeff Coy Committee 9820 Forest Ridge Road Shippensburg, PA 17257	Contribution - State, Pa Disbursement for: Primary General Other (specify)	03/08/1999 03/12/1999 06/24/1999	$250.00 $250.00 $300.00
I. Full Name, Mailing Address and ZIP Code Delaware County Republican Finance Committee 333 West Front Street Media, PA 19063	Contribution - State, Pa Disbursement for: Primary General Other (specify)	01/22/1999 05/27/1999	$1,000.00 $300.00

SUBTOTAL of Disbursements This Page (optional) ..... >	$4,175.00
TOTAL This Period (last page this line number only) ..... >	

SCHEDULE B	ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 3 OF 9
			FOR LINE NUMBER 2 9

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NAME OF COMMITTEE (in Full)

> BluePAC Pennsylvania Blue Cross Plans PAC

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
DeLuca for Legislative Committee 1416 Barbara Drive Verona, PA 15147	Contribution - State, Pa Disbursement for: Primary General Other (specify)	03/08/1999 03/08/1999	$250.00 $250.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Democratic Steel Senate Campaign Committee P.O. Box 3782 Harrisburg, PA 17105	Contribution - State, Pa Disbursement for: Primary General Other (specify)	08/10/1999	$500.00
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Bill DeWeese Campaign Committee P.O. Box 513 Harrisburg, PA 17108	Contribution - State, Pa Disbursement for: Primary General Other (specify)	06/01/1999	$500.00
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Friends of Frank Dermody c/o Patrick Dermody, Treasurer P.O. Box 274 Turtleum, PA 15084	Contribution - State, Pa Disbursement for: Primary General Other (specify)	04/08/1999	$500.00
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Neighbors United to Elect Frank DiCicco c/o Charles Peter Pizzi 6601 Thomas Mill Drive Philadelphia, PA 19128	Contribution - State, Pa Disbursement for: Primary General Other (specify)	03/01/1999	$250.00
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Dwight Evans P.O. Box 19097 Philadelphia, PA 19138	Contribution - State, Pa Disbursement for: Primary General Other (specify)	04/16/1999	$1,000.00
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Fattah for Congress 2043 Walnut Street Philadelphia, PA 19103	Contribution - State, Pa Disbursement for: Primary General Other (specify)	06/20/1999	$500.00
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Friends of Happy Fernandez 400 Market Street, 12th Floor Philadelphia, PA 19106	Contribution - State, Pa Disbursement for: Primary General Other (specify)	04/22/1999	$1,000.00
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Friends of John W Fichter P.O. Box 545 Harrisburg, PA 17108	Contribution - State, Pa Disbursement for: Primary General Other (specify)	03/01/1999	$250.00

SUBTOTAL of Disbursements This Page (optional) ..... >	$5,000.00
TOTAL This Period (last page this line number only) ..... >	

SCHEDULE B	ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 4 OF 9 FOR LINE NUMBER 2 9

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NAME OF COMMITTEE (In Full)

> BluePAC Pennsylvania Blue Cross Plans PAC

	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
A. Full Name, Mailing Address and ZIP Code Fumo for Senate Committee 1208 Taylor Street, 2nd Floor Philadelphia, PA 19148	Contribution - State, Pa Disbursement for: Primary General Other (specify)	05/06/1999	$2,500.00
B. Full Name, Mailing Address and ZIP Code Committee to Elect Tom Gannon P.O. Box 125 Folsom, PA 19033	Purpose of Disbursement Contribution - State, Pa Disbursement for: Primary General Other (specify)	Date (month, day, year) 05/13/1999	Amount of Each Disbursement This Period $250.00
C. Full Name, Mailing Address and ZIP Code Committee to Elect Donna Gentile O'Donnell c/o Robert W. O'Donnell Two Penn Center Plaza Philadelphia, PA 19102	Purpose of Disbursement Contribution - State, Pa Disbursement for: Primary General Other (specify)	Date (month, day, year) 01/06/1999	Amount of Each Disbursement This Period $250.00
D. Full Name, Mailing Address and ZIP Code Friends of Jim Gerlach P.O. Box 762 Harrisburg, PA 17108	Purpose of Disbursement Contribution - State, Pa Disbursement for: Primary General Other (specify)	Date (month, day, year) 03/25/1999	Amount of Each Disbursement This Period $300.00
E. Full Name, Mailing Address and ZIP Code Terry Gillen for City Council c/o Charles Peter Pizzi 8601 Thomas Mill Drive Philadelphia, PA 19128	Purpose of Disbursement Contribution - State, Pa Disbursement for: Primary General Other (specify)	Date (month, day, year) 01/06/1999	Amount of Each Disbursement This Period $250.00
F. Full Name, Mailing Address and ZIP Code Friends of Colin Hanna c/o Congressman Joseph R. Pitts P.O. Box 775 Unionville, PA 19375	Purpose of Disbursement Contribution - State, Pa Disbursement for: Primary General Other (specify)	Date (month, day, year) 04/22/1999	Amount of Each Disbursement This Period $500.00
G. Full Name, Mailing Address and ZIP Code Friends of Tim Hennessey 1178 Foxview Road Pottstown, PA 19465	Purpose of Disbursement Contribution - State, Pa Disbursement for: Primary General Other (specify)	Date (month, day, year) 03/01/1999	Amount of Each Disbursement This Period $250.00
H. Full Name, Mailing Address and ZIP Code Hershey for Legislature Committee 1589 Althouse Road Cochranville, PA 19330	Purpose of Disbursement Contribution - State, Pa Disbursement for: Primary General Other (specify)	Date (month, day, year) 05/13/1999	Amount of Each Disbursement This Period $250.00
I. Full Name, Mailing Address and ZIP Code House Democratic Campaign Committee P.O. Box 555 Harrisburg, PA 17108	Purpose of Disbursement Contribution - State, Pa Disbursement for: Primary General Other (specify)	Date (month, day, year) 03/01/1999 03/08/1999	Amount of Each Disbursement This Period $500.00 $500.00

SUBTOTAL of Disbursements This Page (optional) ..... > $5,550.00

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

SCHEDULE B	ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 5 OF 9 FOR LINE NUMBER 2.9

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NAME OF COMMITTEE (In Full)

> BluePAC Pennsylvania Blue Cross Plans PAC

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
House Republican Campaign Committee P.O. Box 11787 Harrisburg, PA 17108	Contribution - State, Pa Disbursement for: Primary General Other (specify)	01/22/1999 01/22/1999 03/01/1999 06/10/1999	$500.00 $500.00 $1,000.00 $300.00
B. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
Friends of Senator Jubelirer Committee P.O. Box 782 Harrisburg, PA 17108	Contribution - State, Pa Disbursement for: Primary General Other (specify)	04/08/1999	$500.00
C. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
Sam Katz for Mayor c/o Senate Republican Campaign Comm P.O. Box 782 Harrisburg, PA 17108	Contribution - State, Pa Disbursement for: Primary General Other (specify)	02/16/1999 03/25/1999	$500.00 $500.00
D. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
Kenney for Council Committee 1208 Tasker Street, 2nd Floor Philadelphia, PA 19148	Contribution - State, Pa Disbursement for: Primary General Other (specify)	02/16/1999 05/06/1999	$500.00 $250.00
E. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
Longstreth for Philadelphia Fund P.O. Box 58513 Philadelphia, PA 19102-8513	Contribution - State, Pa Disbursement for: Primary General Other (specify)	03/08/1999	$500.00
F. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
People for Madigan P.O. Box 525 Harrisburg, PA 17108-0525	Contribution - State, Pa Disbursement for: Primary General Other (specify)	02/19/1999	$300.00
G. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
Committee to Re-Elect Rick Mariano P.O. Box 45122 Philadelphia, PA 19124-5122	Contribution - State, Pa Disbursement for: Primary General Other (specify)	02/16/1999	$250.00
H. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
Committee to Elect Karen Martynick 702 Sycamore Drive West Chester, PA 19380	Contribution - State, Pa Disbursement for: Primary General Other (specify)	06/24/1999	$300.00
I. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
McGreevey for Mayor 2 Spencer Avenue Colonia, NJ 07067	Contribution - State, Pa Disbursement for: Primary General Other (specify)	06/24/1999	$250.00

SUBTOTAL of Disbursements This Page (optional) ..... >	$6,150.00
TOTAL This Period (last page this line number only) ..... >	

SCHEDULE B	ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 8 OF 9
			FOR LINE NUMBER 2 B

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NAME OF COMMITTEE (in Full)

> BluePAC Pennsylvania Blue Cross Plans PAC

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
A. Friends of Nick Micozzie P.O. Box 234 Clifton Heights, PA 19018	Contribution - State, Pa Disbursement for: Primary General Other (specify)	04/06/1999 05/06/1999	$300.00 $300.00
B. Montco Leadership Fund c/o Joseph H Jacovini, Esq Dilworth Paxson, LLP 1735 Market Street, Suite 3200 Philadelphia, PA 19103-7595	Purpose of Disbursement Contribution - State, Pa Disbursement for: Primary General Other (specify)	01/06/1999	$250.00
C. Montgomery County Republican Committee, c/o Jay R Moyer P.O. Box 395 Lederach, PA 19450	Purpose of Disbursement Contribution - State, Pa Disbursement for: Primary General Other (specify)	01/22/1999 03/25/1999 05/13/1999 06/24/1999	$600.00 $250.00 $625.00 $300.00
D. Joan L Murray District Justice Committee 42 Toft Woods Way Media, PA 19063	Purpose of Disbursement Contribution - State, Pa Disbursement for: Primary General Other (specify)	03/25/1999	$300.00
E. Musto Senate Committee 18 Fairview Drive Hughesdown, PA 18640	Purpose of Disbursement Contribution - State, Pa Disbursement for: Primary General Other (specify)	06/04/1999	$1,000.00
F. Nutter '99 P.O. Box 15506 Philadelphia, PA 19131	Purpose of Disbursement Contribution - State, Pa Disbursement for: Primary General Other (specify)	03/01/1999	$250.00
G. Friends of Denny O'Brien P.O. Box 22433 Philadelphia, PA 19110-2433	Purpose of Disbursement Contribution - State, Pa Disbursement for: Primary General Other (specify)	03/01/1999	$250.00
H. Friends of Brian O'Neill 2000 Market Street, 10th Floor Philadelphia, PA 19103	Purpose of Disbursement Contribution - State, Pa Disbursement for: Primary General Other (specify)	03/01/1999	$300.00
I. Friends of Mike O'Pake 1515 Bernville Road Reading, PA 19601	Purpose of Disbursement Contribution - State, Pa Disbursement for: Primary General Other (specify)	04/29/1999	$250.00

SUBTOTAL of Disbursements This Page (optional) ..... >	$4,975.00
TOTAL This Period (last page this line number only) ..... >	

SCHEDULE B	ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 7 OF 9
			FOR LINE NUMBER 2 B

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NAME OF COMMITTEE (In Full)

> BluePAC Pennsylvania Blue Cross Plans PAC

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Friends of John Perzel P.O. Box 826 Harrisburg, PA 17108	Contribution - State, Pa Disbursement for ☐ Primary ☐ General ☐ Other (specify)	05/13/1999	$500.00
B. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
Friends of Ron Raymond P.O. Box 540 Harrisburg, PA 17108	Contribution - State, Pa Disbursement for ☐ Primary ☐ General ☐ Other (specify)	05/13/1999	$250.00
C. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
Republican City Committee c/o Michael P Meehan 1700 & The Parkway - Windsor LL Philadelphia, PA 19103-2790	Contribution - State, Pa Disbursement for ☐ Primary ☐ General ☐ Other (specify)	01/06/1999 01/18/1999 05/13/1999	$1,000.00 $1,000.00 $500.00
D. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
Ridge Leadership Fund P.O. Box 11667 Harrisburg, PA 17108	Contribution - State, Pa Disbursement for ☐ Primary ☐ General ☐ Other (specify)	05/27/1999	$1,000.00
E. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
Road to Majority '2000 P.O. Box 565 Harrisburg, PA 17108	Contribution - State, Pa Disbursement for ☐ Primary ☐ General ☐ Other (specify)	06/24/1999	$500.00
F. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
Friends of Matt Ryan P.O. Box 577 Harrisburg, PA 17108-0577	Contribution - State, Pa Disbursement for ☐ Primary ☐ General ☐ Other (specify)	06/08/1999	$300.00
G. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
Salvatore for Senate c/o Mary Carisegna, Treasurer 1154 Norwalk Road Philadelphia, PA 19115	Contribution - State, Pa Disbursement for ☐ Primary ☐ General ☐ Other (specify)	01/26/1999 06/10/1999	$500.00 $300.00
H. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
Senate Republican Campaign Committee P.O. Box 792 Harrisburg, PA 17108	Contribution - State, Pa Disbursement for ☐ Primary ☐ General ☐ Other (specify)	06/24/1999	$250.00
I. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
Don Snyder for State Representative P.O. Box 826 Harrisburg, PA 17108	Contribution - State, Pa Disbursement for ☐ Primary ☐ General ☐ Other (specify)	03/01/1999	$300.00

SUBTOTAL of Disbursements This Page (optional) ..... >	$6,400.00
TOTAL This Period (last page this line number only) ..... >	

SCHEDULE B	ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 8 OF 8
			FOR LINE NUMBER 2 9

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NAME OF COMMITTEE (In Full)

> BluePAC Pennsylvania Blue Cross Plans PAC

A. Full Name, Mailing Address and ZIP Code Friends of John F Street Attention Lana Felton-Ghee 230 South Broad Street, 2nd Floor Philadelphia, PA 19102	Purpose of Disbursement Contribution - State, Pa Disbursement for: Primary General Other (specify)	Date (month, day, year) 01/06/1999	Amount of Each Disbursement This Period $1,000.00
B. Full Name, Mailing Address and ZIP Code Jon F Street for Mayor 1321 Arch Street, 3rd Floor Philadelphia, PA 19107	Purpose of Disbursement Contribution - State, Pa Disbursement for: Primary General Other (specify)	Date (month, day, year) 03/30/1999	Amount of Each Disbursement This Period $2,500.00
C. Full Name, Mailing Address and ZIP Code Mike Sturla for State Representative P.O. Box 209 Lancaster, PA 17603	Purpose of Disbursement Contribution - State, Pa Disbursement for: Primary General Other (specify)	Date (month, day, year) 04/16/1999 09/24/1999	Amount of Each Disbursement This Period $100.00 $175.00
D. Full Name, Mailing Address and ZIP Code Friends to Elect Christine Tartaglione 1407 Van Kirk Street Philadelphia, PA 19149	Purpose of Disbursement Contribution - State, Pa Disbursement for: Primary General Other (specify)	Date (month, day, year) 05/13/1999	Amount of Each Disbursement This Period $250.00
E. Full Name, Mailing Address and ZIP Code Friends of Marian B Tasco c/o 1 Presidential Blvd., Suite 209 Bala Cynwyd, PA 19004	Purpose of Disbursement Contribution - State, Pa Disbursement for: Primary General Other (specify)	Date (month, day, year) 05/27/1999	Amount of Each Disbursement This Period $250.00
F. Full Name, Mailing Address and ZIP Code Elinor Z Taylor Campaign Committee 859 Spruce Avenue West Chester, PA 19382	Purpose of Disbursement Contribution - State, Pa Disbursement for: Primary General Other (specify)	Date (month, day, year) 05/27/1999	Amount of Each Disbursement This Period $300.00
G. Full Name, Mailing Address and ZIP Code Thompson for Senate Committee P.O. Box 792 Harrisburg, PA 17108	Purpose of Disbursement Contribution - State, Pa Disbursement for: Primary General Other (specify)	Date (month, day, year) 03/12/1999	Amount of Each Disbursement This Period $250.00
H. Full Name, Mailing Address and ZIP Code Richard Tilghman for State Senator Box 792, Federal Square Station Harrisburg, PA 17108-0458	Purpose of Disbursement Contribution - State, Pa Disbursement for: Primary General Other (specify)	Date (month, day, year) 02/16/1999	Amount of Each Disbursement This Period $500.00
I. Full Name, Mailing Address and ZIP Code Tomlinson for State Senate Committee P.O. Box 792 Harrisburg, PA 17108	Purpose of Disbursement Contribution - State, Pa Disbursement for: Primary General Other (specify)	Date (month, day, year) 08/24/1999	Amount of Each Disbursement This Period $250.00
SUBTOTAL of Disbursements This Page (optional) ..... >			$5,575.00
TOTAL This Period (last page this line number only) ..... >			

SCHEDULE B	ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 9 OF 9 FOR LINE NUMBER 2 9

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NAME OF COMMITTEE (In Full)

BluePAC Pennsylvania Blue Cross Plans PAC

	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
A. Full Name, Mailing Address and ZIP Code Unity '99 125 North 8th Street Philadelphia, PA 19106-9129	Contribution - State, Pa Disbursement for: Primary General Other (specify)	03/12/1999	$5,000.00
B. Full Name, Mailing Address and ZIP Code Upper Darby Republican Campaign Committee Pilgrim Gardens Shopping Center 5035 Township Line Road Drexel Hill, PA 19026	Contribution - State, Pa Disbursement for: Primary General Other (specify)	06/24/1999	$400.00
C. Full Name, Mailing Address and ZIP Code Committee to Re-Elect Anna C. Verna c/o Diana Candelora, Treasurer 1961 Ritner Street, 2nd Floor Philadelphia, PA 19145	Contribution - State, Pa Disbursement for: Primary General Other (specify)	03/25/1999	$1,000.00
D. Full Name, Mailing Address and ZIP Code John White for Mayor P.O. Box 58503 Philadelphia, PA 19102-8503	Contribution - State, Pa Disbursement for: Primary General Other (specify)	04/22/1999	$1,000.00
E. Full Name, Mailing Address and ZIP Code Williams for Senate P.O. Box 6313 Philadelphia, PA 19139	Contribution - State, Pa Disbursement for: Primary General Other (specify)	03/08/1999 05/27/1999	$500.00 $250.00
F. Full Name, Mailing Address and ZIP Code Citizens for Chris Wogan Gerri Bevendur, Treasurer 8932 Alicia Street Philadelphia, PA 19116	Contribution - State, Pa Disbursement for: Primary General Other (specify)	05/27/1999	$250.00
G. Full Name, Mailing Address and ZIP Code Young '99 3031 A Walton Road Norristown, PA 19401	Contribution - State, Pa Disbursement for: Primary General Other (specify)	02/19/1999	$250.00
H. Full Name, Mailing Address and ZIP Code unitemized	Contribution - State, Pa Disbursement for: Primary General Other (specify)	various	$4,675.00
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: Primary General Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional) ..... > $13,325.00

TOTAL This Period (last page this line number only) ..... > $55,750.00

Federal Election Commission

ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS

The Commission has added this page to the end of this filing to indicate how it was received.

☑	Hand Delivered	Date of Receipt 7-22-99
☐	First Class Mail	POSTMARKED
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☐	Postmark Illegible	
☐	Received from the House office of Records and Registration	Date of Receipt
☐	Received from the Senate Office of Public Records	Date of Receipt
☐	Other (Specify):	Postmarked _____ and/or Date of Receipt
☐	Electronic Filing	

JMD
PREPARER

7-22-99
DATE PREPARED

(4/98)