

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines. 12FE4M5 BLUE SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

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

2. FEC IDENTIFICATION NUMBER C C00340364 3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15 Quarterly Report (Q1) (b) Monthly Report Due On: Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (c) 12-Day PRE-Election Report for the: Primary (12P) General (12G) Runoff (12R) (d) 30-Day POST-Election Report for the: General (30G) Runoff (30R) Special (30S)

5. Covering Period 01 01 2016 through 03 31 2016

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 Emily Glidden [Electronically Filed] Date 04 15 2016

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

BLUE SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

Report Covering the Period: From: / / To: / /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2016"/>	<input type="text" value="178893.66"/>	<input type="text" value="178893.66"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="178893.66"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="46248.96"/>	<input type="text" value="46248.96"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="225142.62"/>	<input type="text" value="225142.62"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="42036.36"/>	<input type="text" value="42036.36"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="183106.26"/>	<input type="text" value="183106.26"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	

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

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

BLUE SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

Report Covering the Period: From: M M / D D / Y Y Y Y 01 / 01 / 2016 To: M M / D D / Y Y Y Y 03 / 31 / 2016

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).....	18657.51	18657.51
(ii) Unitemized	27591.45	27591.45
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	46248.96	46248.96
(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)	46248.96	46248.96
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	0.00
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 Transfers (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))..... ▶	46248.96	46248.96
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	46248.96	46248.96

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated 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.....	42000.00	42000.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (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	36.36	36.36
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated 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)) ..	42036.36	42036.36
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	42036.36	42036.36

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	46248.96	46248.96
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	46248.96	46248.96
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 OF 27
	<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	

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

Full Name (Last, First, Middle Initial) A. Tracy Barnes		Date of Receipt MM / DD / YYYY 03 / 31 / 2016 Transaction ID : SA11AI.17496
Mailing Address emp xx2076 50 Beale Street		Amount of Each Receipt this Period 350.00
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item Payroll contribution per cycle \$50.00
Name of Employer Blue Shield of California	Occupation Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

Full Name (Last, First, Middle Initial) B. Elizabeth Blakeman		Date of Receipt MM / DD / YYYY 03 / 31 / 2016 Transaction ID : SA11AI.17509
Mailing Address Employee#xx1919 50 Beale Street		Amount of Each Receipt this Period 210.00
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item Payroll contribution per cycle \$30.00
Name of Employer Blue Shield of CA	Occupation Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	

Full Name (Last, First, Middle Initial) C. Laverne A Brizendine		Date of Receipt MM / DD / YYYY 03 / 31 / 2016 Transaction ID : SA11AI.17518
Mailing Address emp xx6076 50 Beale Street		Amount of Each Receipt this Period 210.00
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item Payroll contribution per cycle \$30.00
Name of Employer Blue Shield	Occupation Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	

SUBTOTAL of Receipts This Page (optional).....▶	770.00
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 7 OF 27
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<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. Thomas Brophy
 Full Name (Last, First, Middle Initial)
 Mailing Address emp xx4076, 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Blue Cross Occupation VP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 330.00

Date of Receipt
 03 / 31 / 2016
Transaction ID : SA11AI.17520
 Amount of Each Receipt this Period 330.00
 Memo Item
 Payroll contribution per cycle \$55.00

B. William Brown
 Full Name (Last, First, Middle Initial)
 Mailing Address emp xx9004, 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 VP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 221.48

Date of Receipt
 03 / 31 / 2016
Transaction ID : SA11AI.17522
 Amount of Each Receipt this Period 221.48
 Memo Item
 Payroll contribution per cycle \$31.64

C. Catherine Campbell
 Full Name (Last, First, Middle Initial)
 Mailing Address Employee# xx0969
 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 CA Occupation VP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 315.00

Date of Receipt
 03 / 31 / 2016
Transaction ID : SA11AI.17525
 Amount of Each Receipt this Period 315.00
 Memo Item
 Payroll contribution per cycle \$45.00

SUBTOTAL of Receipts This Page (optional).....	866.48
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 8 OF 27
	<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	<input type="checkbox"/> 17

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

A. Andrew Chasin
Full Name (Last, First, Middle Initial)

Mailing Address Employee #xx8020
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 ▼
840.00

Date of Receipt
03 / 31 / 2016
Transaction ID : SA11AI.17533

Amount of Each Receipt this Period
840.00

Memo Item
Payroll contribution per cycle \$120.00

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

Mailing Address Emp# xx1109
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 CA Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
700.00

Date of Receipt
03 / 31 / 2016
Transaction ID : SA11AI.17544

Amount of Each Receipt this Period
700.00

Memo Item
Payroll contribution per cycle \$100.00

C. Andrea D. DeBerry
Full Name (Last, First, Middle Initial)

Mailing Address emp xx1594
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 ▼
210.00

Date of Receipt
03 / 31 / 2016
Transaction ID : SA11AI.17548

Amount of Each Receipt this Period
210.00

Memo Item
Payroll contribution per cycle \$30.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 1750.00

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 9 OF 27
	<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	<input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) A. Jacqueline Ejuwa		Date of Receipt MM / DD / YYYY 03 / 31 / 2016 Transaction ID : SA11AI.17561
Mailing Address Employee #xx3113 50 Beale Street		Amount of Each Receipt this Period 259.00
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item Payroll contribution per cycle \$37.00
Name of Employer Blue Shield of CA	Occupation Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 259.00	

Full Name (Last, First, Middle Initial) B. James Elliott		Date of Receipt MM / DD / YYYY 03 / 31 / 2016 Transaction ID : SA11AI.17562
Mailing Address emp xx5549 50 Beale Street		Amount of Each Receipt this Period 315.00
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item Payroll contribution per cycle \$45.00
Name of Employer Blue Shield of California	Occupation VP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 315.00	

Full Name (Last, First, Middle Initial) C. Thomas Epstein		Date of Receipt MM / DD / YYYY 03 / 31 / 2016 Transaction ID : SA11AI.17564
Mailing Address emp xx0249 50 Beale Street		Amount of Each Receipt this Period 665.00
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item Payroll contribution per cycle \$95.00
Name of Employer Blue Shield of California	Occupation Vice President, Public Affairs	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 665.00	

SUBTOTAL of Receipts This Page (optional).....▶	1239.00
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 10 OF 27
	<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	<input type="checkbox"/> 17

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

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

Mailing Address Employee # xx3507
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 CA Occupation EVP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1344.00

Date of Receipt
03 / 31 / 2016
Transaction ID : SA11AI.17567

Amount of Each Receipt this Period
1344.00

Memo Item
Payroll contribution per cycle \$192.00

B. Diana G Gibson Pace
Full Name (Last, First, Middle Initial)

Mailing Address Employee# xx0252
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 CA Occupation Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
245.00

Date of Receipt
03 / 31 / 2016
Transaction ID : SA11AI.17577

Amount of Each Receipt this Period
245.00

Memo Item
Payroll contribution per cycle \$35.00

C. Larry Hilty
Full Name (Last, First, Middle Initial)

Mailing Address emp xx9314
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 ▼
245.00

Date of Receipt
03 / 31 / 2016
Transaction ID : SA11AI.17594

Amount of Each Receipt this Period
245.00

Memo Item
Payroll contribution per cycle \$35.00

SUBTOTAL of Receipts This Page (optional).....	1834.00
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 OF 27
	<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	<input type="checkbox"/> 17

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

A. Jennifer Hobart
Full Name (Last, First, Middle Initial)

Mailing Address Employee #xx6684
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 CA Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt
03 / 31 / 2016
Transaction ID : SA11AI.17598

Amount of Each Receipt this Period
240.00

Memo Item
Payroll contribution per cycle \$40.00

B. Thomas Hurd
Full Name (Last, First, Middle Initial)

Mailing Address Employee #xx6366
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 CA Occupation Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt
03 / 31 / 2016
Transaction ID : SA11AI.17606

Amount of Each Receipt this Period
210.00

Memo Item
Payroll contribution per cycle \$30.00

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

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 Sr. VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
525.00

Date of Receipt
03 / 31 / 2016
Transaction ID : SA11AI.17611

Amount of Each Receipt this Period
525.00

Memo Item
Payroll contribution per cycle \$75.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 975.00

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 OF 27
	<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	<input type="checkbox"/> 17

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

A. Pradip Khemani
 Full Name (Last, First, Middle Initial)
 Mailing Address Employee #xx7222
 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 Director
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **245.00**

Date of Receipt
 03 / 31 / 2016
Transaction ID : SA11AI.17624
 Amount of Each Receipt this Period
245.00
 Memo Item
 Payroll contribution per cycle \$35.00

B. Tina Kibler
 Full Name (Last, First, Middle Initial)
 Mailing Address emp xx5267
 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 VP
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **455.00**

Date of Receipt
 03 / 31 / 2016
Transaction ID : SA11AI.17625
 Amount of Each Receipt this Period
455.00
 Memo Item
 Payroll contribution per cycle \$65.00

C. Andrew Kiefer
 Full Name (Last, First, Middle Initial)
 Mailing Address Employee #xx8277
 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 CA Occupation Director
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **385.00**

Date of Receipt
 03 / 31 / 2016
Transaction ID : SA11AI.17626
 Amount of Each Receipt this Period
385.00
 Memo Item
 Payroll contribution per cycle \$55.00

SUBTOTAL of Receipts This Page (optional)..... **1085.00**
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 13 OF 27
	<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	<input type="checkbox"/> 17

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

A. Keith Kim
Full Name (Last, First, Middle Initial)

Mailing Address Employee #xx5487
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 Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
245.00

Date of Receipt
03 / 31 / 2016
Transaction ID : SA11AI.17627

Amount of Each Receipt this Period
245.00

Memo Item
Payroll contribution per cycle \$35.00

B. Kathleen Lynaugh
Full Name (Last, First, Middle Initial)

Mailing Address emp xx9411
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 ▼
280.00

Date of Receipt
03 / 31 / 2016
Transaction ID : SA11AI.17643

Amount of Each Receipt this Period
280.00

Memo Item
Payroll contribution per cycle \$40.00

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

Mailing Address emp xx6510
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 President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
700.00

Date of Receipt
03 / 31 / 2016
Transaction ID : SA11AI.17646

Amount of Each Receipt this Period
700.00

Memo Item
Payroll contribution per cycle \$100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 1225.00

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 OF 27
	<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	<input type="checkbox"/> 17

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

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

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 VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt
03 / 31 / 2016
Transaction ID : SA11AI.17649

Amount of Each Receipt this Period
210.00

Memo Item
Payroll contribution per cycle \$30.00

B. Kristen Miranda
Full Name (Last, First, Middle Initial)

Mailing Address emp xx3904, 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 VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt
03 / 31 / 2016
Transaction ID : SA11AI.17656

Amount of Each Receipt this Period
350.00

Memo Item
Payroll contribution per cycle \$50.00

C. Stephanie Morimoto
Full Name (Last, First, Middle Initial)

Mailing Address Emp# xx0769
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 CA Occupation Assoc. General Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
315.00

Date of Receipt
03 / 31 / 2016
Transaction ID : SA11AI.17659

Amount of Each Receipt this Period
315.00

Memo Item
Payroll contribution per cycle \$45.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 875.00

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 15 OF 27
	<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	<input type="checkbox"/> 17

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

A. Michael Murray
Full Name (Last, First, Middle Initial)

Mailing Address Employee# xx1032
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 CA Occupation CFO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
420.00

Date of Receipt
03 / 31 / 2016
Transaction ID : SA11AI.17663

Amount of Each Receipt this Period
420.00

Memo Item
Payroll contribution per cycle \$60.00

B. Matthew Nye
Full Name (Last, First, Middle Initial)

Mailing Address Employee # xx3144
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 CA Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt
03 / 31 / 2016
Transaction ID : SA11AI.17665

Amount of Each Receipt this Period
350.00

Memo Item
Payroll contribution per cycle \$50.00

c. Mary O'Hara
Full Name (Last, First, Middle Initial)

Mailing Address Employee # xx0977
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 CA Occupation SVP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
490.00

Date of Receipt
03 / 31 / 2016
Transaction ID : SA11AI.17668

Amount of Each Receipt this Period
490.00

Memo Item
Payroll contribution per cycle \$70.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 1260.00

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 16 OF 27
	<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. Michael O'Neil
Full Name (Last, First, Middle Initial)

Mailing Address Employee# xx8692
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 CA Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt
03 / 31 / 2016
Transaction ID : SA11AI.17669

Amount of Each Receipt this Period
350.00

Memo Item
Payroll contribution per cycle \$50.00

B. Armine Papouchian-Kulinski
Full Name (Last, First, Middle Initial)

Mailing Address Employee #xx5680
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 VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
280.00

Date of Receipt
03 / 31 / 2016
Transaction ID : SA11AI.17675

Amount of Each Receipt this Period
280.00

Memo Item
Payroll contribution per cycle \$40.00

C. Shayna Schulz
Full Name (Last, First, Middle Initial)

Mailing Address Employee # xx3526
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 CA Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
315.00

Date of Receipt
03 / 31 / 2016
Transaction ID : SA11AI.17705

Amount of Each Receipt this Period
315.00

Memo Item
Payroll contribution per cycle \$45.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 945.00

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 17 OF 27
	<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	<input type="checkbox"/> 17

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

A. Michael Sheils
Full Name (Last, First, Middle Initial)

Mailing Address Employee# xx5617
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 CA Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
315.00

Date of Receipt
03 / 31 / 2016
Transaction ID : SA11AI.17711

Amount of Each Receipt this Period
315.00

Memo Item
Payroll contribution per cycle \$45.00

B. Stephen Shivinsky
Full Name (Last, First, Middle Initial)

Mailing Address Employee# xx8369
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 CA Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
315.00

Date of Receipt
03 / 31 / 2016
Transaction ID : SA11AI.17716

Amount of Each Receipt this Period
315.00

Memo Item
Payroll contribution per cycle \$45.00

C. Gilbert Solomon
Full Name (Last, First, Middle Initial)

Mailing Address emp xx1700
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 Medical Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
323.05

Date of Receipt
03 / 31 / 2016
Transaction ID : SA11AI.17720

Amount of Each Receipt this Period
323.05

Memo Item
Payroll contribution per cycle \$46.15

SUBTOTAL of Receipts This Page (optional)..... ▶ 953.05

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 OF 27
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. Robert Spector
 Full Name (Last, First, Middle Initial)
 Mailing Address emp xx4420, 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 Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 448.84

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 31 / 2016
Transaction ID : SA11AI.17723
 Amount of Each Receipt this Period
 448.84
 Memo Item
 Payroll contribution per cycle \$64.12

B. Michael Stuart
 Full Name (Last, First, Middle Initial)
 Mailing Address Employee# xx2061 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 CA Occupation VP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 315.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 31 / 2016
Transaction ID : SA11AI.17728
 Amount of Each Receipt this Period
 315.00
 Memo Item
 Payroll contribution per cycle \$45.00

C. Cecilia Sun
 Full Name (Last, First, Middle Initial)
 Mailing Address Employee # xx3131 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 CA Occupation VP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 315.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 31 / 2016
Transaction ID : SA11AI.17731
 Amount of Each Receipt this Period
 315.00
 Memo Item
 Payroll contribution per cycle \$45.00

SUBTOTAL of Receipts This Page (optional).....▶ 1078.84
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 19 OF 27
<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

Full Name (Last, First, Middle Initial) A. Eric Terndrup		Date of Receipt MM / DD / YYYY 03 / 31 / 2016 Transaction ID : SA11AI.17735
Mailing Address emp xx4199 50 Beale St.		Amount of Each Receipt this Period 231.14
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C	Memo Item <input type="checkbox"/> Payroll contribution per cycle \$33.02	
Name of Employer Blue Shield of California	Occupation Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 231.14	

Full Name (Last, First, Middle Initial) B. Nels M Thygeson		Date of Receipt MM / DD / YYYY 03 / 31 / 2016 Transaction ID : SA11AI.17738
Mailing Address Employee# xx8616 50 Beale Street		Amount of Each Receipt this Period 385.00
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C	Memo Item <input type="checkbox"/> Payroll contribution per cycle \$55.00	
Name of Employer Blue Shield of CA	Occupation VP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 385.00	

Full Name (Last, First, Middle Initial) C. Devon M Valencia		Date of Receipt MM / DD / YYYY 03 / 31 / 2016 Transaction ID : SA11AI.17746
Mailing Address Emp# xx2459 50 Beale Street		Amount of Each Receipt this Period 315.00
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C	Memo Item <input type="checkbox"/> Payroll contribution per cycle \$45.00	
Name of Employer Blue Shield of CA	Occupation VP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 315.00	

SUBTOTAL of Receipts This Page (optional).....	931.14
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 OF 27
	<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	<input type="checkbox"/> 17

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

A. Todd Walthall
 Full Name (Last, First, Middle Initial)
 Mailing Address Employee# xx2537
 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 CA Occupation SVP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 490.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 31 / 2016
Transaction ID : SA11AI.17756
 Amount of Each Receipt this Period
 490.00
 Memo Item
 Payroll contribution per cycle \$70.00

B. Melissa Welch Barker
 Full Name (Last, First, Middle Initial)
 Mailing Address Employee# xx1512
 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 VP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 315.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 31 / 2016
Transaction ID : SA11AI.17758
 Amount of Each Receipt this Period
 315.00
 Memo Item
 Payroll contribution per cycle \$45.00

C. Darrin Wells
 Full Name (Last, First, Middle Initial)
 Mailing Address Employee# xx8661
 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 CA Occupation VP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 315.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 31 / 2016
Transaction ID : SA11AI.17759
 Amount of Each Receipt this Period
 315.00
 Memo Item
 Payroll contribution per cycle \$45.00

SUBTOTAL of Receipts This Page (optional).....▶	1120.00
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 21 OF 27
	<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	<input type="checkbox"/> 17

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

A. Kathleen Wells
Full Name (Last, First, Middle Initial)

Mailing Address Emp# xx8546
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 CA Occupation Sr. Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt
03 / 31 / 2016
Transaction ID : SA11AI.17760

Amount of Each Receipt this Period
210.00

Memo Item
Payroll contribution per cycle \$30.00

B. Ray Wengender
Full Name (Last, First, Middle Initial)

Mailing Address Emp# xx1054
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 CA Occupation Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
280.00

Date of Receipt
03 / 31 / 2016
Transaction ID : SA11AI.17761

Amount of Each Receipt this Period
280.00

Memo Item
Payroll contribution per cycle \$40.00

C. Bryce Williams
Full Name (Last, First, Middle Initial)

Mailing Address Employee# xx8031
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 CA Occupation Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
315.00

Date of Receipt
03 / 31 / 2016
Transaction ID : SA11AI.17764

Amount of Each Receipt this Period
315.00

Memo Item
Payroll contribution per cycle \$45.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 805.00

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 22 OF 27
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

Full Name (Last, First, Middle Initial) A. Kenneth Wood		Date of Receipt MM / DD / YYYY 03 / 31 / 2016 Transaction ID : SA11AI.17770
Mailing Address emp xx6494 50 Beale Street		Amount of Each Receipt this Period 700.00
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C	Name of Employer Blue Shield of California	<input type="checkbox"/> Memo Item Payroll contribution per cycle \$100.00
Occupation SVP	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 700.00

Full Name (Last, First, Middle Initial) B. Amy Yao		Date of Receipt MM / DD / YYYY 03 / 31 / 2016 Transaction ID : SA11AI.17775
Mailing Address 50 Beale Street employee# xx5363		Amount of Each Receipt this Period 245.00
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C	Name of Employer Blue Shield of California	<input type="checkbox"/> Memo Item Payroll contribution per cycle \$35.00
Occupation VP	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 245.00

Full Name (Last, First, Middle Initial) C.		Date of Receipt MM / DD / YYYY
Mailing Address		Amount of Each Receipt this Period
City	State	Zip Code
FEC ID number of contributing federal political committee. C	Name of Employer	<input type="checkbox"/> Memo Item
Occupation	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼

SUBTOTAL of Receipts This Page (optional).....▶	945.00
TOTAL This Period (last page this line number only).....▶	18657.51

**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

Full Name (Last, First, Middle Initial)

A. BENNET FOR COLORADO

Mailing Address 1900 GRANT STREET SUITE 1170

City DENVER State CO Zip Code 80203

Purpose of Disbursement
2016 General Contribution

Candidate Name
BENNET FOR COLORADO

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼
State: CO District: 00

Date of Disbursement

/ /

Transaction ID : SB23.17795

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. BLUMENTHAL FOR CONNECTICUT

Mailing Address C/O CACACE TUSCH & SANTAGATA
777 SUMMER ST SUITE 103

City STAMFORD State CT Zip Code 06901

Purpose of Disbursement
2016 Primary Contribution

Candidate Name
BLUMENTHAL FOR CONNECTICUT

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼
State: CT District: 00

Date of Disbursement

/ /

Transaction ID : SB23.17786

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. BLUMENTHAL FOR CONNECTICUT

Mailing Address C/O CACACE TUSCH & SANTAGATA
777 SUMMER ST SUITE 103

City STAMFORD State CT Zip Code 06901

Purpose of Disbursement
2016 General Contribution

Candidate Name
BLUMENTHAL FOR CONNECTICUT

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼
State: CT District: 00

Date of Disbursement

/ /

Transaction ID : SB23.17787

Amount of Each Disbursement this Period

Memo Item

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

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

**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

Full Name (Last, First, Middle Initial)

A. COLORADO DEMOCRATIC PARTY

Mailing Address 789 SHERMAN STREET, SUITE 110

City DENVER State CO Zip Code 80203

Purpose of Disbursement
2016 Contribution

Candidate Name
COLORADO DEMOCRATIC PARTY

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼
State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 / 25 / 2016

Transaction ID : **SB23.17805**

Amount of Each Disbursement this Period

2000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. DEMOCRATIC CONG. CAMPAIGN COMM.

Mailing Address 430 South Capitol Street SE
2nd Floor

City Washington State DC Zip Code 20003

Purpose of Disbursement
2016 Contribution

Candidate Name
DEMOCRATIC CONG. CAMPAIGN COMM.

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼
State: DC District: 00

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
01 / 07 / 2016

Transaction ID : **SB23.17796**

Amount of Each Disbursement this Period

5000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. DEMOCRATIC SEN. CAMPAIGN COMMITTEE

Mailing Address 120 MARYLAND AVENUE NE

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement
2016 Contribution

Candidate Name
DEMOCRATIC SEN. CAMPAIGN COMMITTEE

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼
State: DC District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 / 29 / 2016

Transaction ID : **SB23.17780**

Amount of Each Disbursement this Period

5000.00

Memo Item

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

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

12000.00

**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)

<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

Full Name (Last, First, Middle Initial)

A. IMPACT

Mailing Address 192 LEXINGTON AVE.
SUITE 1001

City NEW YORK State NY Zip Code 10016

Purpose of Disbursement
2016 Contribution

Candidate Name

IMPACT

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

/ /

Transaction ID : SB23.17811

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. KATIE MCGINTY FOR SENATE

Mailing Address PO BOX 22447

City PHILADELPHIA State PA Zip Code 19110

Purpose of Disbursement
2016 Primary Contribution

Candidate Name

KATIE MCGINTY FOR SENATE

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: PA District: 00

Date of Disbursement

/ /

Transaction ID : SB23.17815

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. M-PAC

Mailing Address 700 13TH STREET, NW
SUITE 600

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
2016 Contribution

Candidate Name

M-PAC

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

/ /

Transaction ID : SB23.17794

Amount of Each Disbursement this Period

Memo Item

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

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

**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

Full Name (Last, First, Middle Initial)

A. NATIONAL REPUBLICAN SENATORIAL COMMITTEE

Mailing Address 425 SECOND STREET NE

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement
2016 Contribution

Candidate Name
NATIONAL REPUBLICAN SENATORIAL COMMITTEE

Office Sought: House Senate President
Disbursement For: 2016
 Primary General
 Other (specify) ▼
State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 / 24 / 2016

Transaction ID : **SB23.17797**

Amount of Each Disbursement this Period

5000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. NEXT CENTURY FUND

Mailing Address 116 S ROYAL STREET

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
2016 Contribution

Candidate Name
NEXT CENTURY FUND

Office Sought: House Senate President
Disbursement For: 2016
 Primary General
 Other (specify) ▼
State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 / 11 / 2016

Transaction ID : **SB23.17788**

Amount of Each Disbursement this Period

2500.00

Memo Item

Full Name (Last, First, Middle Initial)

C. PEM PAC

Mailing Address 1050 17TH STREET, NW
SUITE 590

City WASHINGTON State DC Zip Code 20036

Purpose of Disbursement
2016 Contribution

Candidate Name
PEM PAC

Office Sought: House Senate President
Disbursement For: 2016
 Primary General
 Other (specify) ▼
State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 / 03 / 2016

Transaction ID : **SB23.17813**

Amount of Each Disbursement this Period

1000.00

Memo Item

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

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

8500.00

**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)

<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

Full Name (Last, First, Middle Initial)

A. ROCK CITY PAC

Mailing Address 1015 STONEBRIDGE PARK DRIVE

City FRANKLIN State TN Zip Code 37069

Purpose of Disbursement
2016 Contribution

Candidate Name
ROCK CITY PAC

Office Sought: House Senate President
State: District:

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
03 / 03 / 2016

Transaction ID : **SB23.17790**

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. TED LIEU FOR CONGRESS

Mailing Address 6380 WILSHIRE BLVD #1612

City LOS ANGELES State CA Zip Code 90048

Purpose of Disbursement
2016 Primary Contribution

Candidate Name
TED LIEU FOR CONGRESS

Office Sought: House Senate President
State: CA District: 33

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
03 / 24 / 2016

Transaction ID : **SB23.17784**

Amount of Each Disbursement this Period

2000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. VALADAO FOR CONGRESS

Mailing Address 504 VAN NESS

City FRESNO State CA Zip Code 93721

Purpose of Disbursement
2016 Primary Contribution

Candidate Name
VALADAO FOR CONGRESS

Office Sought: House Senate President
State: CA District: 21

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
03 / 24 / 2016

Transaction ID : **SB23.17783**

Amount of Each Disbursement this Period

5000.00

Memo Item

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

8000.00

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

42000.00