01/17/2006 15 : 12

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (In full)

USE FEC MAILING LABEL OR TYPE OR PRINT

Example: If typing, type over the lines

CareFirst BlueCross BlueShield Associates' Federal PAC

ADDRESS (number and street)

10455 Mill Run Circle

Check if different than previously reported. (ACC)

Owings Mills | MD | 21117

CITY | STATE | ZIPCODE

2. **FEC IDENTIFICATION NUMBER**

C00286922

3. IS THIS REPORT — NEW (N) X **OR** AMENDED (A)

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report(Q1)
- July 15 Quarterly Report(Q2)
- October 15 Quarterly Report(Q3)
- X January 31 Quarterly Report(YE)
- July 31 Mid-Year Report(Non-election Year Only) (MY)
- Termination Report (TER)

(b) Monthly Report Due On:

Feb 20 (M2)	May 20 (M5)	Aug 20 (M8)	Nov 20 (M11) (Non-Election Year Only)
Mar 20 (M3)	Jun 20 (M6)	Sep 20 (M9)	Dec 20 (M12) (Non-Election Year Only)
Apr 20 (M4)	Jul 20 (M7)	Oct 20 (M10)	Jan 31 (YE)

(c) 12-Day **Pre**-Election Report for the: Primary (12P) | General (12G) | Runoff (12R) | Convention (12C) | Special (12G)

Election on ____ in the State of ____

(d) 30-Day **Post**-Election Report for the: General (30G) | Runoff (30R) | Special (30S)

Election on ____ in the State of ____

5. Covering Period 07 01 2005 through 12 31 2005

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: Jeanne Kennedy

Signature of Treasurer: Electronically Filed by Jeanne Kennedy — Date 01 17 2006

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

Office Use Only							

FEC FORM 3X
(Rev. 02/2003)

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name
CareFirst BlueCross BlueShield Associates' Federal PAC

Report Covering the Period: From: 07 01 2005 To: 12 31 2005

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 2005		2069.46
(b) Cash on Hand at Beginning of Reporting Period	3683.36	
(c) Total Receipts (from Line 19)	5754.90	10369.80
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	9438.26	12439.26
7. Total Disbursements (from Line 31)	8000.00	11000.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	1438.26	1438.26
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	

X 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. 02/2003)

Write or Type Committee Name

CareFirst BlueCross BlueShield Associates' Federal PAC

Report Covering the Period: From: 07 01 2005 To: 12 31 2005

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)	3477.00	3477.00
(ii) Unitemized	2277.90	6892.80
(iii) TOTAL (add Lines 11(a)(i) and (ii)) ▶	5754.90	10369.80
(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) ▶	5754.90	10369.80
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 Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	5754.90	10369.80
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	5754.90	10369.80

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures: (a) Shared Federal/Non-Federal Activity (from Schedule H4) (i) Federal Share	0.00	0.00
(ii) Non-Federal Share	0.00	0.00
(b) Other Federal Operating Expenditures	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)) ▶	0.00	0.00
22. Transfers to Affiliated/Other Party Committees	5500.00	5500.00
23. Contributions to Federal Candidates/Committees and Other Political Committees	2500.00	5000.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)	0.00	0.00
26. Loan Repayments Made	0.00	0.00
27. Loans Made	0.00	0.00
28. Refunds of Contributions To: (a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) ▶	0.00	0.00
29. Other Disbursements	0.00	500.00
30. Federal Election Activity (2 U.S.C 431(20)) (a) Shared Federal Election Activity (from Schedule H6) (i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))	8000.00	11000.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31)	8000.00	11000.00

DETAILED SUMMARY PAGE

of Disbursements

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)	5754.90	10369.80
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	5754.90	10369.80
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) or each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 110
(check only one)

X 11a | 11b | 11c | 12 | 13 | 14 | 15 | 16 | 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)
CareFirst BlueCross BlueShield Associates' Federal PAC

A.
Full Name (Last, First, Middle Initial)
Eric R Baugh
Mailing Address 1211 Bayhighland Dr
City: Annapolis | State: MD | Zip Code: 21403
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Svp, Chief Medical Officer
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 287.00

Date of Receipt: 07 01 2005
Transaction ID: R40496
Amount of Each Receipt this Period: 10.50
Payroll Deduction

B.
Full Name (Last, First, Middle Initial)
Eric R Baugh
Mailing Address 1211 Bayhighland Dr
City: Annapolis | State: MD | Zip Code: 21403
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Svp, Chief Medical Officer
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 287.00

Date of Receipt: 07 15 2005
Transaction ID: R40776
Amount of Each Receipt this Period: 10.50
Payroll Deduction

C.
Full Name (Last, First, Middle Initial)
Eric R Baugh
Mailing Address 1211 Bayhighland Dr
City: Annapolis | State: MD | Zip Code: 21403
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Svp, Chief Medical Officer
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 287.00

Date of Receipt: 07 29 2005
Transaction ID: R40840
Amount of Each Receipt this Period: 10.50
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **31.50**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 / 110
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X 11a | 11b | 11c | 12 | 13 | 14 | 15 | 16 | 17

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NAME OF COMMITTEE (In Full)
CareFirst BlueCross BlueShield Associates' Federal PAC

A. Full Name (Last, First, Middle Initial)
Eric R Baugh
Mailing Address 1211 Bayhighland Dr
City: Annapolis | State: MD | Zip Code: 21403
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Svp, Chief Medical Officer
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 287.00

Date of Receipt: 08 12 2005
Transaction ID: R41096
Amount of Each Receipt this Period: 10.50
Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Eric R Baugh
Mailing Address 1211 Bayhighland Dr
City: Annapolis | State: MD | Zip Code: 21403
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Svp, Chief Medical Officer
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 287.00

Date of Receipt: 08 26 2005
Transaction ID: R41321
Amount of Each Receipt this Period: 10.50
Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Eric R Baugh
Mailing Address 1211 Bayhighland Dr
City: Annapolis | State: MD | Zip Code: 21403
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Svp, Chief Medical Officer
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 287.00

Date of Receipt: 09 09 2005
Transaction ID: R41577
Amount of Each Receipt this Period: 10.50
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **31.50**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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FOR LINE NUMBER: PAGE 8 / 110
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NAME OF COMMITTEE (In Full)
CareFirst BlueCross BlueShield Associates' Federal PAC

A.
Full Name (Last, First, Middle Initial)
Eric R Baugh
Mailing Address 1211 Bayhighland Dr
City: Annapolis | State: MD | Zip Code: 21403
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Svp, Chief Medical Officer
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 287.00

Date of Receipt: 09 23 2005
Transaction ID: R41641
Amount of Each Receipt this Period: 10.50
Payroll Deduction

B.
Full Name (Last, First, Middle Initial)
Eric R Baugh
Mailing Address 1211 Bayhighland Dr
City: Annapolis | State: MD | Zip Code: 21403
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Svp, Chief Medical Officer
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 287.00

Date of Receipt: 10 07 2005
Transaction ID: R41885
Amount of Each Receipt this Period: 10.50
Payroll Deduction

C.
Full Name (Last, First, Middle Initial)
Eric R Baugh
Mailing Address 1211 Bayhighland Dr
City: Annapolis | State: MD | Zip Code: 21403
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Svp, Chief Medical Officer
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 287.00

Date of Receipt: 10 21 2005
Transaction ID: R42084
Amount of Each Receipt this Period: 10.50
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **31.50**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 9 / 110
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NAME OF COMMITTEE (In Full)
CareFirst BlueCross BlueShield Associates' Federal PAC

A. Full Name (Last, First, Middle Initial)
Eric R Baugh
Mailing Address 1211 Bayhighland Dr
City: Annapolis | State: MD | Zip Code: 21403
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Svp, Chief Medical Officer
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 287.00

Date of Receipt: 11 04 2005
Transaction ID: R42396
Amount of Each Receipt this Period: 10.50
Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Eric R Baugh
Mailing Address 1211 Bayhighland Dr
City: Annapolis | State: MD | Zip Code: 21403
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Svp, Chief Medical Officer
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 287.00

Date of Receipt: 11 18 2005
Transaction ID: R42462
Amount of Each Receipt this Period: 14.00
Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Eric R Baugh
Mailing Address 1211 Bayhighland Dr
City: Annapolis | State: MD | Zip Code: 21403
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Svp, Chief Medical Officer
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 287.00

Date of Receipt: 12 02 2005
Transaction ID: R42649
Amount of Each Receipt this Period: 14.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ 38.50

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 10 / 110
(check only one)
X 11a | 11b | 11c | 12 | 13 | 14 | 15 | 16 | 17

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NAME OF COMMITTEE (In Full)
CareFirst BlueCross BlueShield Associates' Federal PAC

A.
Full Name (Last, First, Middle Initial)
Eric R Baugh
Mailing Address 1211 Bayhighland Dr
City: Annapolis | State: MD | Zip Code: 21403
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Svp, Chief Medical Officer
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 287.00

Date of Receipt: 12 16 2005
Transaction ID: R42837
Amount of Each Receipt this Period: 14.00
Payroll Deduction

B.
Full Name (Last, First, Middle Initial)
Eric R Baugh
Mailing Address 1211 Bayhighland Dr
City: Annapolis | State: MD | Zip Code: 21403
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Svp, Chief Medical Officer
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 287.00

Date of Receipt: 12 30 2005
Transaction ID: R43086
Amount of Each Receipt this Period: 14.00
Payroll Deduction

C.
Full Name (Last, First, Middle Initial)
Booker T Carter
Mailing Address 18905 Federal Hill Court
City: Bowie | State: MD | Zip Code: 20716
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: VP, Claims & Dc Operations
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 287.00

Date of Receipt: 07 01 2005
Transaction ID: R40482
Amount of Each Receipt this Period: 10.50
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ 38.50

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 11 / 110
(check only one)

X 11a | 11b | 11c | 12 | 13 | 14 | 15 | 16 | 17

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NAME OF COMMITTEE (In Full)
CareFirst BlueCross BlueShield Associates' Federal PAC

A.
Full Name (Last, First, Middle Initial)
Booker T Carter
Mailing Address 16905 Federal Hill Court
City: Bowie | State: MD | Zip Code: 20716
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: VP, Claims & Dc Operations
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 287.00

Date of Receipt: 07 15 2005
Transaction ID: R40772
Amount of Each Receipt this Period: 10.50
Payroll Deduction

B.
Full Name (Last, First, Middle Initial)
Booker T Carter
Mailing Address 16905 Federal Hill Court
City: Bowie | State: MD | Zip Code: 20716
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: VP, Claims & Dc Operations
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 287.00

Date of Receipt: 07 29 2005
Transaction ID: R40836
Amount of Each Receipt this Period: 10.50
Payroll Deduction

C.
Full Name (Last, First, Middle Initial)
Booker T Carter
Mailing Address 16905 Federal Hill Court
City: Bowie | State: MD | Zip Code: 20716
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: VP, Claims & Dc Operations
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 287.00

Date of Receipt: 08 12 2005
Transaction ID: R41082
Amount of Each Receipt this Period: 10.50
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **31.50**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 12 / 110
(check only one)

X 11a | 11b | 11c | 12 | 13 | 14 | 15 | 16 | 17

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NAME OF COMMITTEE (In Full)
CareFirst BlueCross BlueShield Associates' Federal PAC

A.
Full Name (Last, First, Middle Initial)
Booker T Carter
Mailing Address 16905 Federal Hill Court
City: Bowie | State: MD | Zip Code: 20716
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: VP, Claims & Dc Operations
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 287.00

Date of Receipt: 08 26 2005
Transaction ID: R41317
Amount of Each Receipt this Period: 10.50
Payroll Deduction

B.
Full Name (Last, First, Middle Initial)
Booker T Carter
Mailing Address 16905 Federal Hill Court
City: Bowie | State: MD | Zip Code: 20716
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: VP, Claims & Dc Operations
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 287.00

Date of Receipt: 09 09 2005
Transaction ID: R41573
Amount of Each Receipt this Period: 10.50
Payroll Deduction

C.
Full Name (Last, First, Middle Initial)
Booker T Carter
Mailing Address 16905 Federal Hill Court
City: Bowie | State: MD | Zip Code: 20716
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: VP, Claims & Dc Operations
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 287.00

Date of Receipt: 09 23 2005
Transaction ID: R41637
Amount of Each Receipt this Period: 10.50
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **31.50**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 13 / 110
(check only one)

X 11a | 11b | 11c | 12 | 13 | 14 | 15 | 16 | 17

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NAME OF COMMITTEE (In Full)
CareFirst BlueCross BlueShield Associates' Federal PAC

A.
Full Name (Last, First, Middle Initial)
Booker T Carter
Mailing Address 16905 Federal Hill Court
City: Bowie | State: MD | Zip Code: 20716
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: VP, Claims & Dc Operations
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 287.00

Date of Receipt: 10 07 2005
Transaction ID: R41891
Amount of Each Receipt this Period: 10.50
Payroll Deduction

B.
Full Name (Last, First, Middle Initial)
Booker T Carter
Mailing Address 16905 Federal Hill Court
City: Bowie | State: MD | Zip Code: 20716
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: VP, Claims & Dc Operations
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 287.00

Date of Receipt: 10 21 2005
Transaction ID: R42080
Amount of Each Receipt this Period: 10.50
Payroll Deduction

C.
Full Name (Last, First, Middle Initial)
Booker T Carter
Mailing Address 16905 Federal Hill Court
City: Bowie | State: MD | Zip Code: 20716
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: VP, Claims & Dc Operations
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 287.00

Date of Receipt: 11 04 2005
Transaction ID: R42332
Amount of Each Receipt this Period: 10.50
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **31.50**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 14 / 110
(check only one)

X 11a | 11b | 11c | 12 | 13 | 14 | 15 | 16 | 17

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NAME OF COMMITTEE (In Full)
CareFirst BlueCross BlueShield Associates' Federal PAC

A.
Full Name (Last, First, Middle Initial)
Booker T Carter
Mailing Address 16905 Federal Hill Court
City: Bowie | State: MD | Zip Code: 20716
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: VP, Claims & Dc Operations
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 287.00

Date of Receipt: 11 18 2005
Transaction ID: R42458
Amount of Each Receipt this Period: 14.00
Payroll Deduction

B.
Full Name (Last, First, Middle Initial)
Booker T Carter
Mailing Address 16905 Federal Hill Court
City: Bowie | State: MD | Zip Code: 20716
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: VP, Claims & Dc Operations
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 287.00

Date of Receipt: 12 02 2005
Transaction ID: R42645
Amount of Each Receipt this Period: 14.00
Payroll Deduction

C.
Full Name (Last, First, Middle Initial)
Booker T Carter
Mailing Address 16905 Federal Hill Court
City: Bowie | State: MD | Zip Code: 20716
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: VP, Claims & Dc Operations
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 287.00

Date of Receipt: 12 16 2005
Transaction ID: R42833
Amount of Each Receipt this Period: 14.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **42.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 15 / 110
(check only one)

X 11a | 11b | 11c | 12 | 13 | 14 | 15 | 16 | 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)
CareFirst BlueCross BlueShield Associates' Federal PAC

A. Full Name (Last, First, Middle Initial)
Booker T Carter
Mailing Address 16905 Federal Hill Court
City: Bowie | State: MD | Zip Code: 20716
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: VP, Claims & Dc Operations
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 287.00

Date of Receipt: 12 30 2005
Transaction ID: R43082
Amount of Each Receipt this Period: 14.00
Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Gregory M Chaney
Mailing Address 18 Fox Creek Court
City: Owings Mills | State: MD | Zip Code: 21117
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Evp, Cfo & Treasurer
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 410.00

Date of Receipt: 07 01 2005
Transaction ID: R40488
Amount of Each Receipt this Period: 15.00
Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Gregory M Chaney
Mailing Address 18 Fox Creek Court
City: Owings Mills | State: MD | Zip Code: 21117
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Evp, Cfo & Treasurer
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 410.00

Date of Receipt: 07 15 2005
Transaction ID: R40768
Amount of Each Receipt this Period: 15.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **44.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 16 / 110
(check only one)
X 11a | 11b | 11c | 12 | 13 | 14 | 15 | 16 | 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)
CareFirst BlueCross BlueShield Associates' Federal PAC

A.
Full Name (Last, First, Middle Initial)
Gregory M Cheney
Mailing Address 18 Fox Creek Court
City: Owings Mills | State: MD | Zip Code: 21117
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Evp, Cfo & Treasurer
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 410.00

Date of Receipt: 07 29 2005
Transaction ID: R40832
Amount of Each Receipt this Period: 15.00
Payroll Deduction

B.
Full Name (Last, First, Middle Initial)
Gregory M Cheney
Mailing Address 18 Fox Creek Court
City: Owings Mills | State: MD | Zip Code: 21117
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Evp, Cfo & Treasurer
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 410.00

Date of Receipt: 08 12 2005
Transaction ID: R41088
Amount of Each Receipt this Period: 15.00
Payroll Deduction

C.
Full Name (Last, First, Middle Initial)
Gregory M Cheney
Mailing Address 18 Fox Creek Court
City: Owings Mills | State: MD | Zip Code: 21117
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Evp, Cfo & Treasurer
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 410.00

Date of Receipt: 08 26 2005
Transaction ID: R41313
Amount of Each Receipt this Period: 15.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **45.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 17 / 110
(check only one)
X 11a | 11b | 11c | 12 | 13 | 14 | 15 | 16 | 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)
CareFirst BlueCross BlueShield Associates' Federal PAC

A.
Full Name (Last, First, Middle Initial)
Gregory M Cheney
Mailing Address 18 Fox Creek Court
City: Owings Mills | State: MD | Zip Code: 21117
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Evp, Cfo & Treasurer
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 410.00

Date of Receipt: 09 09 2005
Transaction ID: R41589
Amount of Each Receipt this Period: 15.00
Payroll Deduction

B.
Full Name (Last, First, Middle Initial)
Gregory M Cheney
Mailing Address 18 Fox Creek Court
City: Owings Mills | State: MD | Zip Code: 21117
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Evp, Cfo & Treasurer
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 410.00

Date of Receipt: 09 23 2005
Transaction ID: R41633
Amount of Each Receipt this Period: 15.00
Payroll Deduction

C.
Full Name (Last, First, Middle Initial)
Gregory M Cheney
Mailing Address 18 Fox Creek Court
City: Owings Mills | State: MD | Zip Code: 21117
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Evp, Cfo & Treasurer
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 410.00

Date of Receipt: 10 07 2005
Transaction ID: R41887
Amount of Each Receipt this Period: 15.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **45.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 18 / 110
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X 11a | 11b | 11c | 12 | 13 | 14 | 15 | 16 | 17

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NAME OF COMMITTEE (In Full)
CareFirst BlueCross BlueShield Associates' Federal PAC

A. Full Name (Last, First, Middle Initial)
Gregory M Cheney
Mailing Address 18 Fox Creek Court
City: Owings Mills | State: MD | Zip Code: 21117
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Evp, Cfo & Treasurer
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 410.00

Date of Receipt: 10 21 2005
Transaction ID: R42076
Amount of Each Receipt this Period: 15.00
Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Gregory M Cheney
Mailing Address 18 Fox Creek Court
City: Owings Mills | State: MD | Zip Code: 21117
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Evp, Cfo & Treasurer
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 410.00

Date of Receipt: 11 04 2005
Transaction ID: R42328
Amount of Each Receipt this Period: 15.00
Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Gregory M Cheney
Mailing Address 18 Fox Creek Court
City: Owings Mills | State: MD | Zip Code: 21117
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Evp, Cfo & Treasurer
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 410.00

Date of Receipt: 11 18 2005
Transaction ID: R42454
Amount of Each Receipt this Period: 20.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ 50.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 19 / 110
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X 11a | 11b | 11c | 12 | 13 | 14 | 15 | 16 | 17

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NAME OF COMMITTEE (In Full)
CareFirst BlueCross BlueShield Associates' Federal PAC

A. Full Name (Last, First, Middle Initial)
Gregory M Cheney
Mailing Address 18 Fox Creek Court
City: Owings Mills | State: MD | Zip Code: 21117
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Evp, Cfo & Treasurer
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 410.00
Date of Receipt: 12 02 2005
Transaction ID: R42641
Amount of Each Receipt this Period: 20.00
Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Gregory M Cheney
Mailing Address 18 Fox Creek Court
City: Owings Mills | State: MD | Zip Code: 21117
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Evp, Cfo & Treasurer
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 410.00
Date of Receipt: 12 16 2005
Transaction ID: R42829
Amount of Each Receipt this Period: 20.00
Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Gregory M Cheney
Mailing Address 18 Fox Creek Court
City: Owings Mills | State: MD | Zip Code: 21117
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Evp, Cfo & Treasurer
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 410.00
Date of Receipt: 12 30 2005
Transaction ID: R43078
Amount of Each Receipt this Period: 20.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **60.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 20 / 110
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X 11a | 11b | 11c | 12 | 13 | 14 | 15 | 16 | 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)
CareFirst BlueCross BlueShield Associates' Federal PAC

A.
Full Name (Last, First, Middle Initial)
Rita A Costello
Mailing Address 1911 Corbridge Lane
City: Monkton | State: MD | Zip Code: 21111
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Svp, Strategic Marketing
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 246.00

Date of Receipt: 07 01 2005
Transaction ID: R40486
Amount of Each Receipt this Period: 9.00
Payroll Deduction

B.
Full Name (Last, First, Middle Initial)
Rita A Costello
Mailing Address 1911 Corbridge Lane
City: Monkton | State: MD | Zip Code: 21111
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Svp, Strategic Marketing
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 246.00

Date of Receipt: 07 15 2005
Transaction ID: R40766
Amount of Each Receipt this Period: 9.00
Payroll Deduction

C.
Full Name (Last, First, Middle Initial)
Rita A Costello
Mailing Address 1911 Corbridge Lane
City: Monkton | State: MD | Zip Code: 21111
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Svp, Strategic Marketing
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 246.00

Date of Receipt: 07 29 2005
Transaction ID: R40830
Amount of Each Receipt this Period: 9.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **27.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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FOR LINE NUMBER: PAGE 21 / 110
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X 11a | 11b | 11c | 12 | 13 | 14 | 15 | 16 | 17

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NAME OF COMMITTEE (In Full)
CareFirst BlueCross BlueShield Associates' Federal PAC

A. Full Name (Last, First, Middle Initial)
Rita A Costello
Mailing Address 1911 Corbridge Lane
City: Monkton | State: MD | Zip Code: 21111
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Svp, Strategic Marketing
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 246.00

Date of Receipt: 08 12 2005
Transaction ID: R41086
Amount of Each Receipt this Period: 9.00
Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Rita A Costello
Mailing Address 1911 Corbridge Lane
City: Monkton | State: MD | Zip Code: 21111
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Svp, Strategic Marketing
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 246.00

Date of Receipt: 08 26 2005
Transaction ID: R41311
Amount of Each Receipt this Period: 9.00
Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Rita A Costello
Mailing Address 1911 Corbridge Lane
City: Monkton | State: MD | Zip Code: 21111
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Svp, Strategic Marketing
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 246.00

Date of Receipt: 09 09 2005
Transaction ID: R41567
Amount of Each Receipt this Period: 9.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **27.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 22 / 110
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NAME OF COMMITTEE (In Full)
CareFirst BlueCross BlueShield Associates' Federal PAC

A. Full Name (Last, First, Middle Initial)
Rita A Costello
Mailing Address 1911 Corbridge Lane
City: Monkton | State: MD | Zip Code: 21111
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Svp, Strategic Marketing
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 246.00

Date of Receipt: 09 23 2005
Transaction ID: R41631
Amount of Each Receipt this Period: 9.00
Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Rita A Costello
Mailing Address 1911 Corbridge Lane
City: Monkton | State: MD | Zip Code: 21111
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Svp, Strategic Marketing
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 246.00

Date of Receipt: 10 07 2005
Transaction ID: R41885
Amount of Each Receipt this Period: 9.00
Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Rita A Costello
Mailing Address 1911 Corbridge Lane
City: Monkton | State: MD | Zip Code: 21111
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Svp, Strategic Marketing
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 246.00

Date of Receipt: 10 21 2005
Transaction ID: R42074
Amount of Each Receipt this Period: 9.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **27.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 23 / 110
(check only one)
X 11a | 11b | 11c | 12 | 13 | 14 | 15 | 16 | 17

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NAME OF COMMITTEE (In Full)
CareFirst BlueCross BlueShield Associates' Federal PAC

A.
Full Name (Last, First, Middle Initial)
Rita A Costello
Mailing Address 1911 Corbridge Lane
City: Monkton | State: MD | Zip Code: 21111
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Svp, Strategic Marketing
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 246.00

Date of Receipt: 11 04 2005
Transaction ID: R42326
Amount of Each Receipt this Period: 9.00
Payroll Deduction

B.
Full Name (Last, First, Middle Initial)
Rita A Costello
Mailing Address 1911 Corbridge Lane
City: Monkton | State: MD | Zip Code: 21111
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Svp, Strategic Marketing
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 246.00

Date of Receipt: 11 18 2005
Transaction ID: R42452
Amount of Each Receipt this Period: 12.00
Payroll Deduction

C.
Full Name (Last, First, Middle Initial)
Rita A Costello
Mailing Address 1911 Corbridge Lane
City: Monkton | State: MD | Zip Code: 21111
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Svp, Strategic Marketing
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 246.00

Date of Receipt: 12 02 2005
Transaction ID: R42639
Amount of Each Receipt this Period: 12.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **33.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 24 / 110
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X 11a | 11b | 11c | 12 | 13 | 14 | 15 | 16 | 17

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NAME OF COMMITTEE (In Full)
CareFirst BlueCross BlueShield Associates' Federal PAC

A.
Full Name (Last, First, Middle Initial)
Rita A Costello
Mailing Address 1911 Corbridge Lane
City: Monkton | State: MD | Zip Code: 21111
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Svp, Strategic Marketing
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 246.00

Date of Receipt: 12 16 2005
Transaction ID: R42827
Amount of Each Receipt this Period: 12.00
Payroll Deduction

B.
Full Name (Last, First, Middle Initial)
Rita A Costello
Mailing Address 1911 Corbridge Lane
City: Monkton | State: MD | Zip Code: 21111
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Svp, Strategic Marketing
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 246.00

Date of Receipt: 12 30 2005
Transaction ID: R43076
Amount of Each Receipt this Period: 12.00
Payroll Deduction

C.
Full Name (Last, First, Middle Initial)
Gregory A Devou
Mailing Address 3132 River Valley Chase
City: West Friendship | State: MD | Zip Code: 21794
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Evp & Chief Marketing Offr
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 328.00

Date of Receipt: 07 01 2005
Transaction ID: R40484
Amount of Each Receipt this Period: 12.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **36.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 25 / 110
(check only one)

X 11a | 11b | 11c | 12 | 13 | 14 | 15 | 16 | 17

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NAME OF COMMITTEE (In Full)
CareFirst BlueCross BlueShield Associates' Federal PAC

A.
Full Name (Last, First, Middle Initial)
Gregory A Devou
Mailing Address 3132 River Valley Chase
City: West Friendship | State: MD | Zip Code: 21794
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Evp & Chief Marketing Offr
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 328.00

Date of Receipt: 07 15 2005
Transaction ID: R40774
Amount of Each Receipt this Period: 12.00
Payroll Deduction

B.
Full Name (Last, First, Middle Initial)
Gregory A Devou
Mailing Address 3132 River Valley Chase
City: West Friendship | State: MD | Zip Code: 21794
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Evp & Chief Marketing Offr
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 328.00

Date of Receipt: 07 29 2005
Transaction ID: R40838
Amount of Each Receipt this Period: 12.00
Payroll Deduction

C.
Full Name (Last, First, Middle Initial)
Gregory A Devou
Mailing Address 3132 River Valley Chase
City: West Friendship | State: MD | Zip Code: 21794
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Evp & Chief Marketing Offr
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 328.00

Date of Receipt: 08 12 2005
Transaction ID: R41084
Amount of Each Receipt this Period: 12.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **36.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 26 / 110
(check only one)

X 11a | 11b | 11c | 12 | 13 | 14 | 15 | 16 | 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)
CareFirst BlueCross BlueShield Associates' Federal PAC

A.
Full Name (Last, First, Middle Initial)
Gregory A Devou
Mailing Address 3132 River Valley Chase
City: West Friendship | State: MD | Zip Code: 21794
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Evp & Chief Marketing Offr
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 328.00

Date of Receipt: 08 26 2005
Transaction ID: R41319
Amount of Each Receipt this Period: 12.00
Payroll Deduction

B.
Full Name (Last, First, Middle Initial)
Gregory A Devou
Mailing Address 3132 River Valley Chase
City: West Friendship | State: MD | Zip Code: 21794
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Evp & Chief Marketing Offr
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 328.00

Date of Receipt: 09 09 2005
Transaction ID: R41575
Amount of Each Receipt this Period: 12.00
Payroll Deduction

C.
Full Name (Last, First, Middle Initial)
Gregory A Devou
Mailing Address 3132 River Valley Chase
City: West Friendship | State: MD | Zip Code: 21794
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Evp & Chief Marketing Offr
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 328.00

Date of Receipt: 09 23 2005
Transaction ID: R41639
Amount of Each Receipt this Period: 12.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **36.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 27 / 110
(check only one)

X 11a | 11b | 11c | 12 | 13 | 14 | 15 | 16 | 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)
CareFirst BlueCross BlueShield Associates' Federal PAC

A.
Full Name (Last, First, Middle Initial)
Gregory A Devou
Mailing Address 3132 River Valley Chase
City: West Friendship | State: MD | Zip Code: 21794
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Evp & Chief Marketing Offr
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 328.00

Date of Receipt: 10 07 2005
Transaction ID: R41893
Amount of Each Receipt this Period: 12.00
Payroll Deduction

B.
Full Name (Last, First, Middle Initial)
Gregory A Devou
Mailing Address 3132 River Valley Chase
City: West Friendship | State: MD | Zip Code: 21794
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Evp & Chief Marketing Offr
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 328.00

Date of Receipt: 10 21 2005
Transaction ID: R42082
Amount of Each Receipt this Period: 12.00
Payroll Deduction

C.
Full Name (Last, First, Middle Initial)
Gregory A Devou
Mailing Address 3132 River Valley Chase
City: West Friendship | State: MD | Zip Code: 21794
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Evp & Chief Marketing Offr
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 328.00

Date of Receipt: 11 04 2005
Transaction ID: R42334
Amount of Each Receipt this Period: 12.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **36.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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X 11a | 11b | 11c | 12 | 13 | 14 | 15 | 16 | 17

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NAME OF COMMITTEE (In Full)
CareFirst BlueCross BlueShield Associates' Federal PAC

A.
Full Name (Last, First, Middle Initial)
Gregory A Devou
Mailing Address 3132 River Valley Chase
City: West Friendship | State: MD | Zip Code: 21794
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Evp & Chief Marketing Offr
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 328.00

Date of Receipt: 11 18 2005
Transaction ID: R42460
Amount of Each Receipt this Period: 16.00
Payroll Deduction

B.
Full Name (Last, First, Middle Initial)
Gregory A Devou
Mailing Address 3132 River Valley Chase
City: West Friendship | State: MD | Zip Code: 21794
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Evp & Chief Marketing Offr
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 328.00

Date of Receipt: 12 02 2005
Transaction ID: R42647
Amount of Each Receipt this Period: 16.00
Payroll Deduction

C.
Full Name (Last, First, Middle Initial)
Gregory A Devou
Mailing Address 3132 River Valley Chase
City: West Friendship | State: MD | Zip Code: 21794
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Evp & Chief Marketing Offr
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 328.00

Date of Receipt: 12 16 2005
Transaction ID: R42835
Amount of Each Receipt this Period: 16.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶	48.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 29 / 110
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X 11a | 11b | 11c | 12 | 13 | 14 | 15 | 16 | 17

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NAME OF COMMITTEE (In Full)
CareFirst BlueCross BlueShield Associates' Federal PAC

A. Full Name (Last, First, Middle Initial)
Gregory A Devou
Mailing Address 3132 River Valley Chase
City: West Friendship | State: MD | Zip Code: 21794
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Evp & Chief Marketing Offr
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 328.00

Date of Receipt: 12 30 2005
Transaction ID: R43084
Amount of Each Receipt this Period: 16.00
Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Frances P Doherty
Mailing Address 5715 Meyer Avenue
City: New Market | State: MD | Zip Code: 21774
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: VP, Government Affairs
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 246.00

Date of Receipt: 07 01 2005
Transaction ID: R40480
Amount of Each Receipt this Period: 9.00
Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Frances P Doherty
Mailing Address 5715 Meyer Avenue
City: New Market | State: MD | Zip Code: 21774
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: VP, Government Affairs
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 246.00

Date of Receipt: 07 15 2005
Transaction ID: R40770
Amount of Each Receipt this Period: 9.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **34.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 30 / 110
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NAME OF COMMITTEE (In Full)
CareFirst BlueCross BlueShield Associates' Federal PAC

A.
Full Name (Last, First, Middle Initial)
Frances P Doherty
Mailing Address 5715 Meyer Avenue
City: New Market | State: MD | Zip Code: 21774
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: VP, Government Affairs
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 246.00

Date of Receipt: 07 29 2005
Transaction ID: R40834
Amount of Each Receipt this Period: 9.00
Payroll Deduction

B.
Full Name (Last, First, Middle Initial)
Frances P Doherty
Mailing Address 5715 Meyer Avenue
City: New Market | State: MD | Zip Code: 21774
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: VP, Government Affairs
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 246.00

Date of Receipt: 08 12 2005
Transaction ID: R41080
Amount of Each Receipt this Period: 9.00
Payroll Deduction

C.
Full Name (Last, First, Middle Initial)
Frances P Doherty
Mailing Address 5715 Meyer Avenue
City: New Market | State: MD | Zip Code: 21774
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: VP, Government Affairs
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 246.00

Date of Receipt: 08 26 2005
Transaction ID: R41315
Amount of Each Receipt this Period: 9.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **27.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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FOR LINE NUMBER: PAGE 31 / 110
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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)
CareFirst BlueCross BlueShield Associates' Federal PAC

A.
Full Name (Last, First, Middle Initial)
Frances P Doherty
Mailing Address 5715 Meyer Avenue
City: New Market | State: MD | Zip Code: 21774
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: VP, Government Affairs
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 246.00

Date of Receipt: 09 09 2005
Transaction ID: R41571
Amount of Each Receipt this Period: 9.00
Payroll Deduction

B.
Full Name (Last, First, Middle Initial)
Frances P Doherty
Mailing Address 5715 Meyer Avenue
City: New Market | State: MD | Zip Code: 21774
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: VP, Government Affairs
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 246.00

Date of Receipt: 09 23 2005
Transaction ID: R41635
Amount of Each Receipt this Period: 9.00
Payroll Deduction

C.
Full Name (Last, First, Middle Initial)
Frances P Doherty
Mailing Address 5715 Meyer Avenue
City: New Market | State: MD | Zip Code: 21774
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: VP, Government Affairs
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 246.00

Date of Receipt: 10 07 2005
Transaction ID: R41889
Amount of Each Receipt this Period: 9.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **27.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 32 / 110
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NAME OF COMMITTEE (In Full)
CareFirst BlueCross BlueShield Associates' Federal PAC

A.
Full Name (Last, First, Middle Initial)
Frances P Doherty
Mailing Address 5715 Meyer Avenue
City: New Market | State: MD | Zip Code: 21774
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: VP, Government Affairs
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 246.00

Date of Receipt: 10 21 2005
Transaction ID: R42078
Amount of Each Receipt this Period: 9.00
Payroll Deduction

B.
Full Name (Last, First, Middle Initial)
Frances P Doherty
Mailing Address 5715 Meyer Avenue
City: New Market | State: MD | Zip Code: 21774
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: VP, Government Affairs
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 246.00

Date of Receipt: 11 04 2005
Transaction ID: R42330
Amount of Each Receipt this Period: 9.00
Payroll Deduction

C.
Full Name (Last, First, Middle Initial)
Frances P Doherty
Mailing Address 5715 Meyer Avenue
City: New Market | State: MD | Zip Code: 21774
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: VP, Government Affairs
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 246.00

Date of Receipt: 11 18 2005
Transaction ID: R42456
Amount of Each Receipt this Period: 12.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **30.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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FOR LINE NUMBER: PAGE 33 / 110
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NAME OF COMMITTEE (In Full)
CareFirst BlueCross BlueShield Associates' Federal PAC

A.
Full Name (Last, First, Middle Initial)
Frances P Doherty
Mailing Address 5715 Meyer Avenue
City: New Market | State: MD | Zip Code: 21774
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: VP, Government Affairs
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 246.00

Date of Receipt: 12 02 2005
Transaction ID: R42643
Amount of Each Receipt this Period: 12.00
Payroll Deduction

B.
Full Name (Last, First, Middle Initial)
Frances P Doherty
Mailing Address 5715 Meyer Avenue
City: New Market | State: MD | Zip Code: 21774
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: VP, Government Affairs
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 246.00

Date of Receipt: 12 16 2005
Transaction ID: R42831
Amount of Each Receipt this Period: 12.00
Payroll Deduction

C.
Full Name (Last, First, Middle Initial)
Frances P Doherty
Mailing Address 5715 Meyer Avenue
City: New Market | State: MD | Zip Code: 21774
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: VP, Government Affairs
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 246.00

Date of Receipt: 12 30 2005
Transaction ID: R43080
Amount of Each Receipt this Period: 12.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **36.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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FOR LINE NUMBER: PAGE 34 / 110
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NAME OF COMMITTEE (In Full)
CareFirst BlueCross BlueShield Associates' Federal PAC

A. Full Name (Last, First, Middle Initial)
Michael B Edwards
Mailing Address 14236 Bradshaw Drive
City: Silver Spring | State: MD | Zip Code: 20905
FEC ID number of contributing federal political committee: C
Name of Employer: Group Hosp & Med Srvcs, Inc
Occupation: Svp, Networks Management
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 205.00

Date of Receipt: 07 01 2005
Transaction ID: R40596
Amount of Each Receipt this Period: 7.50
Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Michael B Edwards
Mailing Address 14236 Bradshaw Drive
City: Silver Spring | State: MD | Zip Code: 20905
FEC ID number of contributing federal political committee: C
Name of Employer: Group Hosp & Med Srvcs, Inc
Occupation: Svp, Networks Management
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 205.00

Date of Receipt: 07 15 2005
Transaction ID: R40816
Amount of Each Receipt this Period: 7.50
Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Michael B Edwards
Mailing Address 14236 Bradshaw Drive
City: Silver Spring | State: MD | Zip Code: 20905
FEC ID number of contributing federal political committee: C
Name of Employer: Group Hosp & Med Srvcs, Inc
Occupation: Svp, Networks Management
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 205.00

Date of Receipt: 07 29 2005
Transaction ID: R40880
Amount of Each Receipt this Period: 7.50
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **22.50**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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FOR LINE NUMBER: PAGE 35 / 110
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X 11a | 11b | 11c | 12 | 13 | 14 | 15 | 16 | 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)
CareFirst BlueCross BlueShield Associates' Federal PAC

A.
Full Name (Last, First, Middle Initial)
Michael B Edwards
Mailing Address 14236 Bradshaw Drive
City: Silver Spring | State: MD | Zip Code: 20905
FEC ID number of contributing federal political committee: C
Name of Employer: Group Hosp & Med Srvcs, Inc
Occupation: Svp, Networks Management
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 205.00

Date of Receipt: 08 12 2005
Transaction ID: R41136
Amount of Each Receipt this Period: 7.50
Payroll Deduction

B.
Full Name (Last, First, Middle Initial)
Michael B Edwards
Mailing Address 14236 Bradshaw Drive
City: Silver Spring | State: MD | Zip Code: 20905
FEC ID number of contributing federal political committee: C
Name of Employer: Group Hosp & Med Srvcs, Inc
Occupation: Svp, Networks Management
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 205.00

Date of Receipt: 08 26 2005
Transaction ID: R41328
Amount of Each Receipt this Period: 7.50
Payroll Deduction

C.
Full Name (Last, First, Middle Initial)
Michael B Edwards
Mailing Address 14236 Bradshaw Drive
City: Silver Spring | State: MD | Zip Code: 20905
FEC ID number of contributing federal political committee: C
Name of Employer: Group Hosp & Med Srvcs, Inc
Occupation: Svp, Networks Management
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 205.00

Date of Receipt: 09 09 2005
Transaction ID: R41584
Amount of Each Receipt this Period: 7.50
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **22.50**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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FOR LINE NUMBER: PAGE 36 / 110
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X 11a | 11b | 11c | 12 | 13 | 14 | 15 | 16 | 17

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NAME OF COMMITTEE (In Full)
CareFirst BlueCross BlueShield Associates' Federal PAC

A.
Full Name (Last, First, Middle Initial)
Michael B Edwards
Mailing Address 14236 Bradshaw Drive
City: Silver Spring | State: MD | Zip Code: 20905
FEC ID number of contributing federal political committee: C
Name of Employer: Group Hosp & Med Srvcs, Inc
Occupation: Svp, Networks Management
Receipt For: Primary General | Other (specify)
Aggregate Year-to-Date: 205.00

Date of Receipt: 09 23 2005
Transaction ID: R41648
Amount of Each Receipt this Period: 7.50
Payroll Deduction

B.
Full Name (Last, First, Middle Initial)
Michael B Edwards
Mailing Address 14236 Bradshaw Drive
City: Silver Spring | State: MD | Zip Code: 20905
FEC ID number of contributing federal political committee: C
Name of Employer: Group Hosp & Med Srvcs, Inc
Occupation: Svp, Networks Management
Receipt For: Primary General | Other (specify)
Aggregate Year-to-Date: 205.00

Date of Receipt: 10 07 2005
Transaction ID: R41902
Amount of Each Receipt this Period: 7.50
Payroll Deduction

C.
Full Name (Last, First, Middle Initial)
Michael B Edwards
Mailing Address 14236 Bradshaw Drive
City: Silver Spring | State: MD | Zip Code: 20905
FEC ID number of contributing federal political committee: C
Name of Employer: Group Hosp & Med Srvcs, Inc
Occupation: Svp, Networks Management
Receipt For: Primary General | Other (specify)
Aggregate Year-to-Date: 205.00

Date of Receipt: 10 21 2005
Transaction ID: R42081
Amount of Each Receipt this Period: 7.50
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **22.50**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 37 / 110
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NAME OF COMMITTEE (In Full)
CareFirst BlueCross BlueShield Associates' Federal PAC

A.
Full Name (Last, First, Middle Initial)
Michael B Edwards
Mailing Address 14236 Bradshaw Drive
City: Silver Spring | State: MD | Zip Code: 20905
FEC ID number of contributing federal political committee: C
Name of Employer: Group Hosp & Med Srvcs, Inc
Occupation: Svp, Networks Management
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 205.00

Date of Receipt: 11 04 2005
Transaction ID: R42343
Amount of Each Receipt this Period: 7.50
Payroll Deduction

B.
Full Name (Last, First, Middle Initial)
Michael B Edwards
Mailing Address 14236 Bradshaw Drive
City: Silver Spring | State: MD | Zip Code: 20905
FEC ID number of contributing federal political committee: C
Name of Employer: Group Hosp & Med Srvcs, Inc
Occupation: Svp, Networks Management
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 205.00

Date of Receipt: 11 18 2005
Transaction ID: R42469
Amount of Each Receipt this Period: 10.00
Payroll Deduction

C.
Full Name (Last, First, Middle Initial)
Michael B Edwards
Mailing Address 14236 Bradshaw Drive
City: Silver Spring | State: MD | Zip Code: 20905
FEC ID number of contributing federal political committee: C
Name of Employer: Group Hosp & Med Srvcs, Inc
Occupation: Svp, Networks Management
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 205.00

Date of Receipt: 12 02 2005
Transaction ID: R42656
Amount of Each Receipt this Period: 10.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **27.50**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
CareFirst BlueCross BlueShield Associates' Federal PAC

A.
Full Name (Last, First, Middle Initial)
Michael B Edwards
Mailing Address 14236 Bradshaw Drive
City: Silver Spring | State: MD | Zip Code: 20905
FEC ID number of contributing federal political committee: C
Name of Employer: Group Hosp & Med Srvcs, Inc
Occupation: Svp, Networks Management
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 205.00

Date of Receipt: 12 16 2005
Transaction ID: R42844
Amount of Each Receipt this Period: 10.00
Payroll Deduction

B.
Full Name (Last, First, Middle Initial)
Michael B Edwards
Mailing Address 14236 Bradshaw Drive
City: Silver Spring | State: MD | Zip Code: 20905
FEC ID number of contributing federal political committee: C
Name of Employer: Group Hosp & Med Srvcs, Inc
Occupation: Svp, Networks Management
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 205.00

Date of Receipt: 12 30 2005
Transaction ID: R43094
Amount of Each Receipt this Period: 10.00
Payroll Deduction

C.
Full Name (Last, First, Middle Initial)
Michael J Felber
Mailing Address 14 Lochmoor Court
City: Timonium | State: MD | Zip Code: 21093
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Svp, Sales
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 287.00

Date of Receipt: 07 01 2005
Transaction ID: R40484
Amount of Each Receipt this Period: 10.50
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **30.50**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (In Full)
CareFirst BlueCross BlueShield Associates' Federal PAC

A.
Full Name (Last, First, Middle Initial)
Michael J Felber
Mailing Address 14 Lochmoor Court
City: Timonium | State: MD | Zip Code: 21093
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Svp, Sales
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 287.00

Date of Receipt: 07 15 2005
Transaction ID: R40764
Amount of Each Receipt this Period: 10.50
Payroll Deduction

B.
Full Name (Last, First, Middle Initial)
Michael J Felber
Mailing Address 14 Lochmoor Court
City: Timonium | State: MD | Zip Code: 21093
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Svp, Sales
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 287.00

Date of Receipt: 07 29 2005
Transaction ID: R40828
Amount of Each Receipt this Period: 10.50
Payroll Deduction

C.
Full Name (Last, First, Middle Initial)
Michael J Felber
Mailing Address 14 Lochmoor Court
City: Timonium | State: MD | Zip Code: 21093
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Svp, Sales
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 287.00

Date of Receipt: 08 12 2005
Transaction ID: R41084
Amount of Each Receipt this Period: 10.50
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **31.50**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 40 / 110
(check only one)
X 11a | 11b | 11c | 12 | 13 | 14 | 15 | 16 | 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)
CareFirst BlueCross BlueShield Associates' Federal PAC

A.
Full Name (Last, First, Middle Initial)
Michael J Felber
Mailing Address 14 Lochmoor Court
City: Timonium | State: MD | Zip Code: 21093
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Svp, Sales
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 287.00

Date of Receipt: 08 26 2005
Transaction ID: R41309
Amount of Each Receipt this Period: 10.50
Payroll Deduction

B.
Full Name (Last, First, Middle Initial)
Michael J Felber
Mailing Address 14 Lochmoor Court
City: Timonium | State: MD | Zip Code: 21093
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Svp, Sales
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 287.00

Date of Receipt: 09 09 2005
Transaction ID: R41565
Amount of Each Receipt this Period: 10.50
Payroll Deduction

C.
Full Name (Last, First, Middle Initial)
Michael J Felber
Mailing Address 14 Lochmoor Court
City: Timonium | State: MD | Zip Code: 21093
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Svp, Sales
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 287.00

Date of Receipt: 09 23 2005
Transaction ID: R41629
Amount of Each Receipt this Period: 10.50
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **31.50**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 41 / 110
(check only one)

X 11a | 11b | 11c | 12 | 13 | 14 | 15 | 16 | 17

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NAME OF COMMITTEE (In Full)
CareFirst BlueCross BlueShield Associates' Federal PAC

A.
Full Name (Last, First, Middle Initial)
Michael J Felber
Mailing Address 14 Lochmoor Court
City: Timonium | State: MD | Zip Code: 21093
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Svp, Sales
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 287.00

Date of Receipt: 10 07 2005
Transaction ID: R41883
Amount of Each Receipt this Period: 10.50
Payroll Deduction

B.
Full Name (Last, First, Middle Initial)
Michael J Felber
Mailing Address 14 Lochmoor Court
City: Timonium | State: MD | Zip Code: 21093
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Svp, Sales
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 287.00

Date of Receipt: 10 21 2005
Transaction ID: R42072
Amount of Each Receipt this Period: 10.50
Payroll Deduction

C.
Full Name (Last, First, Middle Initial)
Michael J Felber
Mailing Address 14 Lochmoor Court
City: Timonium | State: MD | Zip Code: 21093
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Svp, Sales
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 287.00

Date of Receipt: 11 04 2005
Transaction ID: R42324
Amount of Each Receipt this Period: 10.50
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **31.50**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 42 / 110
(check only one)
X 11a | 11b | 11c | 12 | 13 | 14 | 15 | 16 | 17

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NAME OF COMMITTEE (In Full)
CareFirst BlueCross BlueShield Associates' Federal PAC

A.
Full Name (Last, First, Middle Initial)
Michael J Felber
Mailing Address 14 Lochmoor Court
City: Timonium | State: MD | Zip Code: 21093
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Svp, Sales
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 287.00

Date of Receipt: 11 18 2005
Transaction ID: R42450
Amount of Each Receipt this Period: 14.00
Payroll Deduction

B.
Full Name (Last, First, Middle Initial)
Michael J Felber
Mailing Address 14 Lochmoor Court
City: Timonium | State: MD | Zip Code: 21093
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Svp, Sales
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 287.00

Date of Receipt: 12 02 2005
Transaction ID: R42637
Amount of Each Receipt this Period: 14.00
Payroll Deduction

C.
Full Name (Last, First, Middle Initial)
Michael J Felber
Mailing Address 14 Lochmoor Court
City: Timonium | State: MD | Zip Code: 21093
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Svp, Sales
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 287.00

Date of Receipt: 12 16 2005
Transaction ID: R42825
Amount of Each Receipt this Period: 14.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **42.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 43 / 110
(check only one)
X 11a | 11b | 11c | 12 | 13 | 14 | 15 | 16 | 17

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NAME OF COMMITTEE (In Full)
CareFirst BlueCross BlueShield Associates' Federal PAC

A. Full Name (Last, First, Middle Initial)
Michael J Felber
Mailing Address 14 Lochmoor Court
City: Timonium | State: MD | Zip Code: 21093
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Svp, Sales
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 287.00

Date of Receipt: 12 30 2005
Transaction ID: R43074
Amount of Each Receipt this Period: 14.00
Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Michael J Fierro
Mailing Address 5208 Grovemont Dr
City: Elkridge | State: MD | Zip Code: 21075
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Avp, Medical Informatics
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 205.00

Date of Receipt: 07 01 2005
Transaction ID: R40528
Amount of Each Receipt this Period: 7.50
Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Michael J Fierro
Mailing Address 5208 Grovemont Dr
City: Elkridge | State: MD | Zip Code: 21075
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Avp, Medical Informatics
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 205.00

Date of Receipt: 07 15 2005
Transaction ID: R40808
Amount of Each Receipt this Period: 7.50
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **29.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 44 / 110
(check only one)
X 11a | 11b | 11c | 12 | 13 | 14 | 15 | 16 | 17

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NAME OF COMMITTEE (In Full)
CareFirst BlueCross BlueShield Associates' Federal PAC

A.
Full Name (Last, First, Middle Initial)
Michael J Fierro
Mailing Address 5208 Grovemont Dr
City: Elkridge | State: MD | Zip Code: 21075
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Avp, Medical Informatics
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 205.00

Date of Receipt: 07 29 2005
Transaction ID: R40872
Amount of Each Receipt this Period: 7.50
Payroll Deduction

B.
Full Name (Last, First, Middle Initial)
Michael J Fierro
Mailing Address 5208 Grovemont Dr
City: Elkridge | State: MD | Zip Code: 21075
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Avp, Medical Informatics
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 205.00

Date of Receipt: 08 12 2005
Transaction ID: R41128
Amount of Each Receipt this Period: 7.50
Payroll Deduction

C.
Full Name (Last, First, Middle Initial)
Michael J Fierro
Mailing Address 5208 Grovemont Dr
City: Elkridge | State: MD | Zip Code: 21075
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Avp, Medical Informatics
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 205.00

Date of Receipt: 08 26 2005
Transaction ID: R41300
Amount of Each Receipt this Period: 7.50
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **22.50**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 45 / 110
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NAME OF COMMITTEE (In Full)
CareFirst BlueCross BlueShield Associates' Federal PAC

A. Full Name (Last, First, Middle Initial)
Michael J Fierro
Mailing Address 5208 Grovemont Dr
City: Elkridge | State: MD | Zip Code: 21075
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Avp, Medical Informatics
Receipt For: Primary General; Other (specify)
Aggregate Year-to-Date: 205.00

Date of Receipt: 09 09 2005
Transaction ID: R41556
Amount of Each Receipt this Period: 7.50
Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Michael J Fierro
Mailing Address 5208 Grovemont Dr
City: Elkridge | State: MD | Zip Code: 21075
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Avp, Medical Informatics
Receipt For: Primary General; Other (specify)
Aggregate Year-to-Date: 205.00

Date of Receipt: 09 23 2005
Transaction ID: R41620
Amount of Each Receipt this Period: 7.50
Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Michael J Fierro
Mailing Address 5208 Grovemont Dr
City: Elkridge | State: MD | Zip Code: 21075
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Avp, Medical Informatics
Receipt For: Primary General; Other (specify)
Aggregate Year-to-Date: 205.00

Date of Receipt: 10 07 2005
Transaction ID: R41874
Amount of Each Receipt this Period: 7.50
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **22.50**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 46 / 110
(check only one)

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NAME OF COMMITTEE (In Full)
CareFirst BlueCross BlueShield Associates' Federal PAC

A. Full Name (Last, First, Middle Initial)
Michael J Fierro
Mailing Address 5208 Grovemont Dr
City: Elkridge | State: MD | Zip Code: 21075
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Avp, Medical Informatics
Receipt For: Primary General; Other (specify)
Aggregate Year-to-Date: 205.00

Date of Receipt: 10 21 2005
Transaction ID: R42063
Amount of Each Receipt this Period: 7.50
Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Michael J Fierro
Mailing Address 5208 Grovemont Dr
City: Elkridge | State: MD | Zip Code: 21075
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Avp, Medical Informatics
Receipt For: Primary General; Other (specify)
Aggregate Year-to-Date: 205.00

Date of Receipt: 11 04 2005
Transaction ID: R42315
Amount of Each Receipt this Period: 7.50
Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Michael J Fierro
Mailing Address 5208 Grovemont Dr
City: Elkridge | State: MD | Zip Code: 21075
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Avp, Medical Informatics
Receipt For: Primary General; Other (specify)
Aggregate Year-to-Date: 205.00

Date of Receipt: 11 18 2005
Transaction ID: R42441
Amount of Each Receipt this Period: 10.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **25.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 47 / 110
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NAME OF COMMITTEE (In Full)
CareFirst BlueCross BlueShield Associates' Federal PAC

A. Full Name (Last, First, Middle Initial)
Michael J Fierro
Mailing Address 5208 Grovemont Dr
City: Elkridge | State: MD | Zip Code: 21075
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Avp, Medical Informatics
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 205.00

Date of Receipt: 12 02 2005
Transaction ID: R42628
Amount of Each Receipt this Period: 10.00
Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Michael J Fierro
Mailing Address 5208 Grovemont Dr
City: Elkridge | State: MD | Zip Code: 21075
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Avp, Medical Informatics
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 205.00

Date of Receipt: 12 16 2005
Transaction ID: R42816
Amount of Each Receipt this Period: 10.00
Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Michael J Fierro
Mailing Address 5208 Grovemont Dr
City: Elkridge | State: MD | Zip Code: 21075
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Avp, Medical Informatics
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 205.00

Date of Receipt: 12 30 2005
Transaction ID: R43064
Amount of Each Receipt this Period: 10.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **30.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 48 / 110
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NAME OF COMMITTEE (In Full)
CareFirst BlueCross BlueShield Associates' Federal PAC

A.
Full Name (Last, First, Middle Initial)
Ann T Gallant
Mailing Address One Tremblant Court
City: Lutherville | State: MD | Zip Code: 21093
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: VP, Corporate Communications
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 246.00

Date of Receipt: 07 01 2005
Transaction ID: R40495
Amount of Each Receipt this Period: 9.00
Payroll Deduction

B.
Full Name (Last, First, Middle Initial)
Ann T Gallant
Mailing Address One Tremblant Court
City: Lutherville | State: MD | Zip Code: 21093
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: VP, Corporate Communications
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 246.00

Date of Receipt: 07 15 2005
Transaction ID: R40775
Amount of Each Receipt this Period: 9.00
Payroll Deduction

C.
Full Name (Last, First, Middle Initial)
Ann T Gallant
Mailing Address One Tremblant Court
City: Lutherville | State: MD | Zip Code: 21093
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: VP, Corporate Communications
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 246.00

Date of Receipt: 07 29 2005
Transaction ID: R40839
Amount of Each Receipt this Period: 9.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **27.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 49 / 110
(check only one)
X 11a | 11b | 11c | 12 | 13 | 14 | 15 | 16 | 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)
CareFirst BlueCross BlueShield Associates' Federal PAC

A.
Full Name (Last, First, Middle Initial)
Ann T Gallant
Mailing Address One Tremblant Court
City: Lutherville | State: MD | Zip Code: 21093
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: VP, Corporate Communications
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 246.00

Date of Receipt: 08 12 2005
Transaction ID: R41095
Amount of Each Receipt this Period: 9.00
Payroll Deduction

B.
Full Name (Last, First, Middle Initial)
Ann T Gallant
Mailing Address One Tremblant Court
City: Lutherville | State: MD | Zip Code: 21093
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: VP, Corporate Communications
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 246.00

Date of Receipt: 08 26 2005
Transaction ID: R41320
Amount of Each Receipt this Period: 9.00
Payroll Deduction

C.
Full Name (Last, First, Middle Initial)
Ann T Gallant
Mailing Address One Tremblant Court
City: Lutherville | State: MD | Zip Code: 21093
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: VP, Corporate Communications
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 246.00

Date of Receipt: 09 09 2005
Transaction ID: R41576
Amount of Each Receipt this Period: 9.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **27.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 50 / 110
(check only one)

X 11a | 11b | 11c | 12 | 13 | 14 | 15 | 16 | 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)
CareFirst BlueCross BlueShield Associates' Federal PAC

A. Full Name (Last, First, Middle Initial)
Ann T Gallant
Mailing Address One Tremblant Court
City: Lutherville | State: MD | Zip Code: 21093
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: VP, Corporate Communications
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 246.00

Date of Receipt: 09 23 2005
Transaction ID: R41640
Amount of Each Receipt this Period: 9.00
Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Ann T Gallant
Mailing Address One Tremblant Court
City: Lutherville | State: MD | Zip Code: 21093
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: VP, Corporate Communications
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 246.00

Date of Receipt: 10 07 2005
Transaction ID: R41694
Amount of Each Receipt this Period: 9.00
Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Ann T Gallant
Mailing Address One Tremblant Court
City: Lutherville | State: MD | Zip Code: 21093
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: VP, Corporate Communications
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 246.00

Date of Receipt: 10 21 2005
Transaction ID: R42083
Amount of Each Receipt this Period: 9.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **27.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 51 / 110
(check only one)
X 11a | 11b | 11c | 12 | 13 | 14 | 15 | 16 | 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)
CareFirst BlueCross BlueShield Associates' Federal PAC

A.
Full Name (Last, First, Middle Initial)
Ann T Gallant
Mailing Address One Tremblant Court
City: Lutherville | State: MD | Zip Code: 21093
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: VP, Corporate Communications
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 246.00

Date of Receipt: 11 04 2005
Transaction ID: R42335
Amount of Each Receipt this Period: 9.00
Payroll Deduction

B.
Full Name (Last, First, Middle Initial)
Ann T Gallant
Mailing Address One Tremblant Court
City: Lutherville | State: MD | Zip Code: 21093
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: VP, Corporate Communications
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 246.00

Date of Receipt: 11 18 2005
Transaction ID: R42461
Amount of Each Receipt this Period: 12.00
Payroll Deduction

C.
Full Name (Last, First, Middle Initial)
Ann T Gallant
Mailing Address One Tremblant Court
City: Lutherville | State: MD | Zip Code: 21093
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: VP, Corporate Communications
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 246.00

Date of Receipt: 12 02 2005
Transaction ID: R42648
Amount of Each Receipt this Period: 12.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **33.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 52 / 110
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X 11a | 11b | 11c | 12 | 13 | 14 | 15 | 16 | 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)
CareFirst BlueCross BlueShield Associates' Federal PAC

A.
Full Name (Last, First, Middle Initial)
Ann T Gallant
Mailing Address One Tremblant Court
City: Lutherville | State: MD | Zip Code: 21093
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: VP, Corporate Communications
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 246.00

Date of Receipt: 12 16 2005
Transaction ID: R42896
Amount of Each Receipt this Period: 12.00
Payroll Deduction

B.
Full Name (Last, First, Middle Initial)
Ann T Gallant
Mailing Address One Tremblant Court
City: Lutherville | State: MD | Zip Code: 21093
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: VP, Corporate Communications
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 246.00

Date of Receipt: 12 30 2005
Transaction ID: R43085
Amount of Each Receipt this Period: 12.00
Payroll Deduction

C.
Full Name (Last, First, Middle Initial)
Mary A Heckwolf
Mailing Address 4305 Conifer Court
City: Glen Arm | State: MD | Zip Code: 21057
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: VP,Phm/Dental
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 205.00

Date of Receipt: 07 01 2005
Transaction ID: R40489
Amount of Each Receipt this Period: 7.50
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **31.50**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 53 / 110
(check only one)
X 11a | 11b | 11c | 12 | 13 | 14 | 15 | 16 | 17

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NAME OF COMMITTEE (In Full)
CareFirst BlueCross BlueShield Associates' Federal PAC

A.
Full Name (Last, First, Middle Initial)
Mary A Heckwolf
Mailing Address 4305 Conifer Court
City: Glen Arm | State: MD | Zip Code: 21057
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: VP,Phn/Dental
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 205.00

Date of Receipt: 07 15 2005
Transaction ID: R40769
Amount of Each Receipt this Period: 7.50
Payroll Deduction

B.
Full Name (Last, First, Middle Initial)
Mary A Heckwolf
Mailing Address 4305 Conifer Court
City: Glen Arm | State: MD | Zip Code: 21057
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: VP,Phn/Dental
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 205.00

Date of Receipt: 07 29 2005
Transaction ID: R40833
Amount of Each Receipt this Period: 7.50
Payroll Deduction

C.
Full Name (Last, First, Middle Initial)
Mary A Heckwolf
Mailing Address 4305 Conifer Court
City: Glen Arm | State: MD | Zip Code: 21057
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: VP,Phn/Dental
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 205.00

Date of Receipt: 08 12 2005
Transaction ID: R41089
Amount of Each Receipt this Period: 7.50
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **22.50**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 54 / 110
(check only one)
X 11a | 11b | 11c | 12 | 13 | 14 | 15 | 16 | 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)
CareFirst BlueCross BlueShield Associates' Federal PAC

A.
Full Name (Last, First, Middle Initial)
Mary A Heckwolf
Mailing Address 4305 Conifer Court
City: Glen Arm | State: MD | Zip Code: 21057
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: VP,Phn/Dental
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 205.00

Date of Receipt: 08 26 2005
Transaction ID: R41314
Amount of Each Receipt this Period: 7.50
Payroll Deduction

B.
Full Name (Last, First, Middle Initial)
Mary A Heckwolf
Mailing Address 4305 Conifer Court
City: Glen Arm | State: MD | Zip Code: 21057
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: VP,Phn/Dental
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 205.00

Date of Receipt: 09 09 2005
Transaction ID: R41570
Amount of Each Receipt this Period: 7.50
Payroll Deduction

C.
Full Name (Last, First, Middle Initial)
Mary A Heckwolf
Mailing Address 4305 Conifer Court
City: Glen Arm | State: MD | Zip Code: 21057
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: VP,Phn/Dental
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 205.00

Date of Receipt: 09 23 2005
Transaction ID: R41634
Amount of Each Receipt this Period: 7.50
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **22.50**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 55 / 110
(check only one)
X 11a | 11b | 11c | 12 | 13 | 14 | 15 | 16 | 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)
CareFirst BlueCross BlueShield Associates' Federal PAC

A.
Full Name (Last, First, Middle Initial)
Mary A Heckwolf
Mailing Address 4305 Conifer Court
City: Glen Arm | State: MD | Zip Code: 21057
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: VP,Phn/Dental
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 205.00

Date of Receipt: 10 07 2005
Transaction ID: R41688
Amount of Each Receipt this Period: 7.50
Payroll Deduction

B.
Full Name (Last, First, Middle Initial)
Mary A Heckwolf
Mailing Address 4305 Conifer Court
City: Glen Arm | State: MD | Zip Code: 21057
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: VP,Phn/Dental
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 205.00

Date of Receipt: 10 21 2005
Transaction ID: R42077
Amount of Each Receipt this Period: 7.50
Payroll Deduction

C.
Full Name (Last, First, Middle Initial)
Mary A Heckwolf
Mailing Address 4305 Conifer Court
City: Glen Arm | State: MD | Zip Code: 21057
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: VP,Phn/Dental
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 205.00

Date of Receipt: 11 04 2005
Transaction ID: R42329
Amount of Each Receipt this Period: 7.50
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **22.50**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 56 / 110
(check only one)

X 11a | 11b | 11c | 12 | 13 | 14 | 15 | 16 | 17

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NAME OF COMMITTEE (In Full)
CareFirst BlueCross BlueShield Associates' Federal PAC

A.
Full Name (Last, First, Middle Initial)
Mary A Heckwolf
Mailing Address 4305 Conifer Court
City: Glen Arm | State: MD | Zip Code: 21057
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: VP,Phn/Dental
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 205.00

Date of Receipt: 11 18 2005
Transaction ID: R42455
Amount of Each Receipt this Period: 10.00
Payroll Deduction

B.
Full Name (Last, First, Middle Initial)
Mary A Heckwolf
Mailing Address 4305 Conifer Court
City: Glen Arm | State: MD | Zip Code: 21057
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: VP,Phn/Dental
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 205.00

Date of Receipt: 12 02 2005
Transaction ID: R42642
Amount of Each Receipt this Period: 10.00
Payroll Deduction

C.
Full Name (Last, First, Middle Initial)
Mary A Heckwolf
Mailing Address 4305 Conifer Court
City: Glen Arm | State: MD | Zip Code: 21057
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: VP,Phn/Dental
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 205.00

Date of Receipt: 12 16 2005
Transaction ID: R42830
Amount of Each Receipt this Period: 10.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **30.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 57 / 110
(check only one)
X 11a | 11b | 11c | 12 | 13 | 14 | 15 | 16 | 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)
CareFirst BlueCross BlueShield Associates' Federal PAC

A. Full Name (Last, First, Middle Initial)
Mary A Heckwolf
Mailing Address 4305 Conifer Court
City: Glen Arm | State: MD | Zip Code: 21057
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: VP,Phn/Dental
Receipt For: Primary General; Other (specify)
Aggregate Year-to-Date: 205.00

Date of Receipt: 12 30 2005
Transaction ID: R43079
Amount of Each Receipt this Period: 10.00
Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Leon Kaplan
Mailing Address 13033 Jerome Jay Dr
City: Cockeysville | State: MD | Zip Code: 21030
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Evp, Operations
Receipt For: Primary General; Other (specify)
Aggregate Year-to-Date: 410.00

Date of Receipt: 07 01 2005
Transaction ID: R40489
Amount of Each Receipt this Period: 15.00
Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Leon Kaplan
Mailing Address 13033 Jerome Jay Dr
City: Cockeysville | State: MD | Zip Code: 21030
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Evp, Operations
Receipt For: Primary General; Other (specify)
Aggregate Year-to-Date: 410.00

Date of Receipt: 07 15 2005
Transaction ID: R40779
Amount of Each Receipt this Period: 15.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **40.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 58 / 110
(check only one)

X 11a | 11b | 11c | 12 | 13 | 14 | 15 | 16 | 17

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NAME OF COMMITTEE (In Full)
CareFirst BlueCross BlueShield Associates' Federal PAC

A.
Full Name (Last, First, Middle Initial)
Leon Kaplan
Mailing Address 13033 Jerome Jay Dr
City: Cockeysville | State: MD | Zip Code: 21030
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Evp, Operations
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 410.00

Date of Receipt: 07 29 2005
Transaction ID: R40843
Amount of Each Receipt this Period: 15.00
Payroll Deduction

B.
Full Name (Last, First, Middle Initial)
Leon Kaplan
Mailing Address 13033 Jerome Jay Dr
City: Cockeysville | State: MD | Zip Code: 21030
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Evp, Operations
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 410.00

Date of Receipt: 08 12 2005
Transaction ID: R41089
Amount of Each Receipt this Period: 15.00
Payroll Deduction

C.
Full Name (Last, First, Middle Initial)
Leon Kaplan
Mailing Address 13033 Jerome Jay Dr
City: Cockeysville | State: MD | Zip Code: 21030
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Evp, Operations
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 410.00

Date of Receipt: 08 26 2005
Transaction ID: R41324
Amount of Each Receipt this Period: 15.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **45.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 59 / 110
(check only one)

X 11a | 11b | 11c | 12 | 13 | 14 | 15 | 16 | 17

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NAME OF COMMITTEE (In Full)
CareFirst BlueCross BlueShield Associates' Federal PAC

A. Full Name (Last, First, Middle Initial)
Leon Kaplan
Mailing Address 13033 Jerome Jay Dr
City: Cockeysville | State: MD | Zip Code: 21030
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Evp, Operations
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 410.00
Date of Receipt: 09 09 2005
Transaction ID: R41580
Amount of Each Receipt this Period: 15.00
Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Leon Kaplan
Mailing Address 13033 Jerome Jay Dr
City: Cockeysville | State: MD | Zip Code: 21030
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Evp, Operations
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 410.00
Date of Receipt: 09 23 2005
Transaction ID: R41644
Amount of Each Receipt this Period: 15.00
Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Leon Kaplan
Mailing Address 13033 Jerome Jay Dr
City: Cockeysville | State: MD | Zip Code: 21030
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Evp, Operations
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 410.00
Date of Receipt: 10 07 2005
Transaction ID: R41888
Amount of Each Receipt this Period: 15.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **45.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 60 / 110
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X 11a | 11b | 11c | 12 | 13 | 14 | 15 | 16 | 17

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NAME OF COMMITTEE (In Full)
CareFirst BlueCross BlueShield Associates' Federal PAC

A. Full Name (Last, First, Middle Initial)
Leon Kaplan
Mailing Address 13033 Jerome Jay Dr
City: Cockeysville | State: MD | Zip Code: 21030
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Evp, Operations
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 410.00
Date of Receipt: 10 21 2005
Transaction ID: R42087
Amount of Each Receipt this Period: 15.00
Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Leon Kaplan
Mailing Address 13033 Jerome Jay Dr
City: Cockeysville | State: MD | Zip Code: 21030
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Evp, Operations
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 410.00
Date of Receipt: 11 04 2005
Transaction ID: R42339
Amount of Each Receipt this Period: 15.00
Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Leon Kaplan
Mailing Address 13033 Jerome Jay Dr
City: Cockeysville | State: MD | Zip Code: 21030
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Evp, Operations
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 410.00
Date of Receipt: 11 18 2005
Transaction ID: R42465
Amount of Each Receipt this Period: 20.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **50.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 61 / 110
(check only one)
X 11a | 11b | 11c | 12 | 13 | 14 | 15 | 16 | 17

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NAME OF COMMITTEE (In Full)
CareFirst BlueCross BlueShield Associates' Federal PAC

A. Full Name (Last, First, Middle Initial)
Leon Kaplan
Mailing Address 13033 Jerome Jay Dr
City: Cockeysville | State: MD | Zip Code: 21030
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Evp, Operations
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 410.00
Date of Receipt: 12 02 2005
Transaction ID: R42652
Amount of Each Receipt this Period: 20.00
Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Leon Kaplan
Mailing Address 13033 Jerome Jay Dr
City: Cockeysville | State: MD | Zip Code: 21030
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Evp, Operations
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 410.00
Date of Receipt: 12 16 2005
Transaction ID: R42840
Amount of Each Receipt this Period: 20.00
Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Leon Kaplan
Mailing Address 13033 Jerome Jay Dr
City: Cockeysville | State: MD | Zip Code: 21030
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Evp, Operations
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 410.00
Date of Receipt: 12 30 2005
Transaction ID: R43089
Amount of Each Receipt this Period: 20.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **60.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 62 / 110
(check only one)
X 11a | 11b | 11c | 12 | 13 | 14 | 15 | 16 | 17

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NAME OF COMMITTEE (In Full)
CareFirst BlueCross BlueShield Associates' Federal PAC

A.
Full Name (Last, First, Middle Initial)
Edward W O'Neil
Mailing Address 4324 Roland Ave
City: Baltimore | State: MD | Zip Code: 21210
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Svp & Chief Actuary
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 287.00

Date of Receipt: 07 01 2005
Transaction ID: R40500
Amount of Each Receipt this Period: 10.50
Payroll Deduction

B.
Full Name (Last, First, Middle Initial)
Edward W O'Neil
Mailing Address 4324 Roland Ave
City: Baltimore | State: MD | Zip Code: 21210
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Svp & Chief Actuary
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 287.00

Date of Receipt: 07 15 2005
Transaction ID: R40780
Amount of Each Receipt this Period: 10.50
Payroll Deduction

C.
Full Name (Last, First, Middle Initial)
Edward W O'Neil
Mailing Address 4324 Roland Ave
City: Baltimore | State: MD | Zip Code: 21210
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Svp & Chief Actuary
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 287.00

Date of Receipt: 07 29 2005
Transaction ID: R40844
Amount of Each Receipt this Period: 10.50
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **31.50**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 63 / 110
(check only one)
X 11a | 11b | 11c | 12 | 13 | 14 | 15 | 16 | 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)
CareFirst BlueCross BlueShield Associates' Federal PAC

A.
Full Name (Last, First, Middle Initial)
Edward W O'Neil
Mailing Address 4324 Roland Ave
City: Baltimore | State: MD | Zip Code: 21210
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Svp & Chief Actuary
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 287.00

Date of Receipt: 08 12 2005
Transaction ID: R41100
Amount of Each Receipt this Period: 10.50
Payroll Deduction

B.
Full Name (Last, First, Middle Initial)
Edward W O'Neil
Mailing Address 4324 Roland Ave
City: Baltimore | State: MD | Zip Code: 21210
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Svp & Chief Actuary
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 287.00

Date of Receipt: 08 26 2005
Transaction ID: R41325
Amount of Each Receipt this Period: 10.50
Payroll Deduction

C.
Full Name (Last, First, Middle Initial)
Edward W O'Neil
Mailing Address 4324 Roland Ave
City: Baltimore | State: MD | Zip Code: 21210
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Svp & Chief Actuary
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 287.00

Date of Receipt: 09 09 2005
Transaction ID: R41581
Amount of Each Receipt this Period: 10.50
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **31.50**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 64 / 110
(check only one)
X 11a | 11b | 11c | 12 | 13 | 14 | 15 | 16 | 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)
CareFirst BlueCross BlueShield Associates' Federal PAC

A.
Full Name (Last, First, Middle Initial)
Edward W O'Neil
Mailing Address 4324 Roland Ave
City: Baltimore | State: MD | Zip Code: 21210
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Svp & Chief Actuary
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 287.00

Date of Receipt: 09 23 2005
Transaction ID: R41645
Amount of Each Receipt this Period: 10.50
Payroll Deduction

B.
Full Name (Last, First, Middle Initial)
Edward W O'Neil
Mailing Address 4324 Roland Ave
City: Baltimore | State: MD | Zip Code: 21210
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Svp & Chief Actuary
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 287.00

Date of Receipt: 10 07 2005
Transaction ID: R41869
Amount of Each Receipt this Period: 10.50
Payroll Deduction

C.
Full Name (Last, First, Middle Initial)
Edward W O'Neil
Mailing Address 4324 Roland Ave
City: Baltimore | State: MD | Zip Code: 21210
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Svp & Chief Actuary
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 287.00

Date of Receipt: 10 21 2005
Transaction ID: R42088
Amount of Each Receipt this Period: 10.50
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **31.50**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 65 / 110
(check only one)
X 11a | 11b | 11c | 12 | 13 | 14 | 15 | 16 | 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)
CareFirst BlueCross BlueShield Associates' Federal PAC

A.
Full Name (Last, First, Middle Initial)
Edward W O'Neil
Mailing Address 4324 Roland Ave
City: Baltimore | State: MD | Zip Code: 21210
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Svp & Chief Actuary
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 287.00

Date of Receipt: 11 04 2005
Transaction ID: R42340
Amount of Each Receipt this Period: 10.50
Payroll Deduction

B.
Full Name (Last, First, Middle Initial)
Edward W O'Neil
Mailing Address 4324 Roland Ave
City: Baltimore | State: MD | Zip Code: 21210
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Svp & Chief Actuary
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 287.00

Date of Receipt: 11 18 2005
Transaction ID: R42466
Amount of Each Receipt this Period: 14.00
Payroll Deduction

C.
Full Name (Last, First, Middle Initial)
Edward W O'Neil
Mailing Address 4324 Roland Ave
City: Baltimore | State: MD | Zip Code: 21210
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Svp & Chief Actuary
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 287.00

Date of Receipt: 12 02 2005
Transaction ID: R42653
Amount of Each Receipt this Period: 14.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **38.50**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 66 / 110
(check only one)
X 11a | 11b | 11c | 12 | 13 | 14 | 15 | 16 | 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)
CareFirst BlueCross BlueShield Associates' Federal PAC

A.
Full Name (Last, First, Middle Initial)
Edward W O'Neil
Mailing Address 4324 Roland Ave
City: Baltimore | State: MD | Zip Code: 21210
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Svp & Chief Actuary
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 287.00

Date of Receipt: 12 16 2005
Transaction ID: R42841
Amount of Each Receipt this Period: 14.00
Payroll Deduction

B.
Full Name (Last, First, Middle Initial)
Edward W O'Neil
Mailing Address 4324 Roland Ave
City: Baltimore | State: MD | Zip Code: 21210
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Svp & Chief Actuary
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 287.00

Date of Receipt: 12 30 2005
Transaction ID: R43080
Amount of Each Receipt this Period: 14.00
Payroll Deduction

C.
Full Name (Last, First, Middle Initial)
Kevin C O'Neill
Mailing Address 617 W. 40th Street
City: Baltimore | State: MD | Zip Code: 21211
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: VP, Project Management
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 205.00

Date of Receipt: 07 01 2005
Transaction ID: R40487
Amount of Each Receipt this Period: 7.50
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ 35.50

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 67 / 110
(check only one)
X 11a | 11b | 11c | 12 | 13 | 14 | 15 | 16 | 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)
CareFirst BlueCross BlueShield Associates' Federal PAC

A. Full Name (Last, First, Middle Initial)
Kevin C O'Neill
Mailing Address 617 W. 40th Street
City: Baltimore | State: MD | Zip Code: 21211
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: VP, Project Management
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 205.00

Date of Receipt: 07 15 2005
Transaction ID: R40777
Amount of Each Receipt this Period: 7.50
Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Kevin C O'Neill
Mailing Address 617 W. 40th Street
City: Baltimore | State: MD | Zip Code: 21211
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: VP, Project Management
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 205.00

Date of Receipt: 07 29 2005
Transaction ID: R40841
Amount of Each Receipt this Period: 7.50
Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Kevin C O'Neill
Mailing Address 617 W. 40th Street
City: Baltimore | State: MD | Zip Code: 21211
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: VP, Project Management
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 205.00

Date of Receipt: 08 12 2005
Transaction ID: R41087
Amount of Each Receipt this Period: 7.50
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **22.50**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 68 / 110
(check only one)
X 11a | 11b | 11c | 12 | 13 | 14 | 15 | 16 | 17

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NAME OF COMMITTEE (In Full)
CareFirst BlueCross BlueShield Associates' Federal PAC

A.
Full Name (Last, First, Middle Initial)
Kevin C O'Neill
Mailing Address 617 W. 40th Street
City: Baltimore | State: MD | Zip Code: 21211
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: VP, Project Management
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 205.00

Date of Receipt: 08 26 2005
Transaction ID: R41322
Amount of Each Receipt this Period: 7.50
Payroll Deduction

B.
Full Name (Last, First, Middle Initial)
Kevin C O'Neill
Mailing Address 617 W. 40th Street
City: Baltimore | State: MD | Zip Code: 21211
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: VP, Project Management
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 205.00

Date of Receipt: 09 09 2005
Transaction ID: R41578
Amount of Each Receipt this Period: 7.50
Payroll Deduction

C.
Full Name (Last, First, Middle Initial)
Kevin C O'Neill
Mailing Address 617 W. 40th Street
City: Baltimore | State: MD | Zip Code: 21211
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: VP, Project Management
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 205.00

Date of Receipt: 09 23 2005
Transaction ID: R41642
Amount of Each Receipt this Period: 7.50
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **22.50**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 69 / 110
(check only one)

X 11a | 11b | 11c | 12 | 13 | 14 | 15 | 16 | 17

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NAME OF COMMITTEE (In Full)
CareFirst BlueCross BlueShield Associates' Federal PAC

A.
Full Name (Last, First, Middle Initial)
Kevin C O'Neill
Mailing Address 617 W. 40th Street
City: Baltimore | State: MD | Zip Code: 21211
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: VP, Project Management
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 205.00

Date of Receipt: 10 07 2005
Transaction ID: R41896
Amount of Each Receipt this Period: 7.50
Payroll Deduction

B.
Full Name (Last, First, Middle Initial)
Kevin C O'Neill
Mailing Address 617 W. 40th Street
City: Baltimore | State: MD | Zip Code: 21211
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: VP, Project Management
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 205.00

Date of Receipt: 10 21 2005
Transaction ID: R42085
Amount of Each Receipt this Period: 7.50
Payroll Deduction

C.
Full Name (Last, First, Middle Initial)
Kevin C O'Neill
Mailing Address 617 W. 40th Street
City: Baltimore | State: MD | Zip Code: 21211
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: VP, Project Management
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 205.00

Date of Receipt: 11 04 2005
Transaction ID: R42337
Amount of Each Receipt this Period: 7.50
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **22.50**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 70 / 110
(check only one)
X 11a | 11b | 11c | 12 | 13 | 14 | 15 | 16 | 17

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NAME OF COMMITTEE (In Full)
CareFirst BlueCross BlueShield Associates' Federal PAC

A.
Full Name (Last, First, Middle Initial)
Kevin C O'Neill
Mailing Address 617 W. 40th Street
City: Baltimore | State: MD | Zip Code: 21211
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: VP, Project Management
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 205.00

Date of Receipt: 11 18 2005
Transaction ID: R42463
Amount of Each Receipt this Period: 10.00
Payroll Deduction

B.
Full Name (Last, First, Middle Initial)
Kevin C O'Neill
Mailing Address 617 W. 40th Street
City: Baltimore | State: MD | Zip Code: 21211
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: VP, Project Management
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 205.00

Date of Receipt: 12 02 2005
Transaction ID: R42650
Amount of Each Receipt this Period: 10.00
Payroll Deduction

C.
Full Name (Last, First, Middle Initial)
Kevin C O'Neill
Mailing Address 617 W. 40th Street
City: Baltimore | State: MD | Zip Code: 21211
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: VP, Project Management
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 205.00

Date of Receipt: 12 16 2005
Transaction ID: R42838
Amount of Each Receipt this Period: 10.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **30.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 71 / 110
(check only one)
X 11a | 11b | 11c | 12 | 13 | 14 | 15 | 16 | 17

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NAME OF COMMITTEE (In Full)
CareFirst BlueCross BlueShield Associates' Federal PAC

A. Full Name (Last, First, Middle Initial)
Kevin C O'Neill
Mailing Address 817 W. 40th Street
City: Baltimore | State: MD | Zip Code: 21211
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: VP, Project Management
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 205.00

Date of Receipt: 12 30 2005
Transaction ID: R43087
Amount of Each Receipt this Period: 10.00
Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Wanda K Oneferu-Bey
Mailing Address 1319 Robin Road
City: Pikesville | State: MD | Zip Code: 21208
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Avp, Indiv Sales, Trng, Dvlpmt
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 07 01 2005
Transaction ID: R40512
Amount of Each Receipt this Period: 9.00
Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Wanda K Oneferu-Bey
Mailing Address 1319 Robin Road
City: Pikesville | State: MD | Zip Code: 21208
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Avp, Indiv Sales, Trng, Dvlpmt
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 07 15 2005
Transaction ID: R40782
Amount of Each Receipt this Period: 9.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **28.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 72 / 110
(check only one)
X 11a | 11b | 11c | 12 | 13 | 14 | 15 | 16 | 17

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NAME OF COMMITTEE (In Full)
CareFirst BlueCross BlueShield Associates' Federal PAC

A.
Full Name (Last, First, Middle Initial)
Wanda K Oneferu-Bey
Mailing Address 1319 Robin Road
City: Pikesville | State: MD | Zip Code: 21208
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Avp, Indiv Sales, Tmg, Dvlpmt
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 07 29 2005
Transaction ID: R40856
Amount of Each Receipt this Period: 9.00
Payroll Deduction

B.
Full Name (Last, First, Middle Initial)
Wanda K Oneferu-Bey
Mailing Address 1319 Robin Road
City: Pikesville | State: MD | Zip Code: 21208
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Avp, Indiv Sales, Tmg, Dvlpmt
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 08 12 2005
Transaction ID: R41112
Amount of Each Receipt this Period: 9.00
Payroll Deduction

C.
Full Name (Last, First, Middle Initial)
Wanda K Oneferu-Bey
Mailing Address 1319 Robin Road
City: Pikesville | State: MD | Zip Code: 21208
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Avp, Indiv Sales, Tmg, Dvlpmt
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 08 26 2005
Transaction ID: R41284
Amount of Each Receipt this Period: 9.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **27.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 73 / 110
(check only one)
X 11a | 11b | 11c | 12 | 13 | 14 | 15 | 16 | 17

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NAME OF COMMITTEE (In Full)
CareFirst BlueCross BlueShield Associates' Federal PAC

A.
Full Name (Last, First, Middle Initial)
Wanda K Oneferu-Bey
Mailing Address 1319 Robin Road
City: Pikesville | State: MD | Zip Code: 21208
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Avp, Indiv Sales, Tmg, Dvlpmt
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 09 09 2005
Transaction ID: R41540
Amount of Each Receipt this Period: 9.00
Payroll Deduction

B.
Full Name (Last, First, Middle Initial)
Wanda K Oneferu-Bey
Mailing Address 1319 Robin Road
City: Pikesville | State: MD | Zip Code: 21208
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Avp, Indiv Sales, Tmg, Dvlpmt
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 09 23 2005
Transaction ID: R41604
Amount of Each Receipt this Period: 9.00
Payroll Deduction

C.
Full Name (Last, First, Middle Initial)
Wanda K Oneferu-Bey
Mailing Address 1319 Robin Road
City: Pikesville | State: MD | Zip Code: 21208
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Avp, Indiv Sales, Tmg, Dvlpmt
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 10 07 2005
Transaction ID: R41859
Amount of Each Receipt this Period: 9.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **27.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 74 / 110
(check only one)
X 11a | 11b | 11c | 12 | 13 | 14 | 15 | 16 | 17

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NAME OF COMMITTEE (In Full)
CareFirst BlueCross BlueShield Associates' Federal PAC

A.
Full Name (Last, First, Middle Initial)
Wanda K Oneferu-Bey
Mailing Address 1319 Robin Road
City: Pikesville | State: MD | Zip Code: 21208
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Avp, Indiv Sales, Tmg, Dvlpmt
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 10 21 2005
Transaction ID: R42048
Amount of Each Receipt this Period: 9.00
Payroll Deduction

B.
Full Name (Last, First, Middle Initial)
Wanda K Oneferu-Bey
Mailing Address 1319 Robin Road
City: Pikesville | State: MD | Zip Code: 21208
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Avp, Indiv Sales, Tmg, Dvlpmt
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 11 04 2005
Transaction ID: R42300
Amount of Each Receipt this Period: 9.00
Payroll Deduction

C.
Full Name (Last, First, Middle Initial)
Wanda K Oneferu-Bey
Mailing Address 1319 Robin Road
City: Pikesville | State: MD | Zip Code: 21208
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Avp, Indiv Sales, Tmg, Dvlpmt
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 11 18 2005
Transaction ID: R42426
Amount of Each Receipt this Period: 12.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **30.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 75 / 110
(check only one)

X 11a | 11b | 11c | 12 | 13 | 14 | 15 | 16 | 17

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NAME OF COMMITTEE (In Full)
CareFirst BlueCross BlueShield Associates' Federal PAC

A.
Full Name (Last, First, Middle Initial)
Wanda K Oneferu-Bey
Mailing Address 1319 Robin Road
City: Pikesville | State: MD | Zip Code: 21208
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Avp, Indiv Sales, Tmg, Dvlpmt
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 12 02 2005
Transaction ID: R42613
Amount of Each Receipt this Period: 12.00
Payroll Deduction

B.
Full Name (Last, First, Middle Initial)
Wanda K Oneferu-Bey
Mailing Address 1319 Robin Road
City: Pikesville | State: MD | Zip Code: 21208
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Avp, Indiv Sales, Tmg, Dvlpmt
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 12 16 2005
Transaction ID: R42801
Amount of Each Receipt this Period: 12.00
Payroll Deduction

C.
Full Name (Last, First, Middle Initial)
Wanda K Oneferu-Bey
Mailing Address 1319 Robin Road
City: Pikesville | State: MD | Zip Code: 21208
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Avp, Indiv Sales, Tmg, Dvlpmt
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 12 30 2005
Transaction ID: R43049
Amount of Each Receipt this Period: 16.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **40.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 76 / 110
(check only one)

X 11a | 11b | 11c | 12 | 13 | 14 | 15 | 16 | 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)
CareFirst BlueCross BlueShield Associates' Federal PAC

A.
Full Name (Last, First, Middle Initial)
John A Picciotto
Mailing Address 704 Sussex Road
City: Towson | State: MD | Zip Code: 21286
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Evp & General Counsel
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 410.00

Date of Receipt: 07 01 2005
Transaction ID: R40485
Amount of Each Receipt this Period: 15.00
Payroll Deduction

B.
Full Name (Last, First, Middle Initial)
John A Picciotto
Mailing Address 704 Sussex Road
City: Towson | State: MD | Zip Code: 21286
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Evp & General Counsel
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 410.00

Date of Receipt: 07 15 2005
Transaction ID: R40765
Amount of Each Receipt this Period: 15.00
Payroll Deduction

C.
Full Name (Last, First, Middle Initial)
John A Picciotto
Mailing Address 704 Sussex Road
City: Towson | State: MD | Zip Code: 21286
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Evp & General Counsel
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 410.00

Date of Receipt: 07 29 2005
Transaction ID: R40829
Amount of Each Receipt this Period: 15.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **45.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 77 / 110
(check only one)
X 11a | 11b | 11c | 12 | 13 | 14 | 15 | 16 | 17

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NAME OF COMMITTEE (In Full)
CareFirst BlueCross BlueShield Associates' Federal PAC

A.
Full Name (Last, First, Middle Initial)
John A Picciotto
Mailing Address 704 Sussex Road
City: Towson | State: MD | Zip Code: 21286
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Evp & General Counsel
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 410.00

Date of Receipt: 08 12 2005
Transaction ID: R41085
Amount of Each Receipt this Period: 15.00
Payroll Deduction

B.
Full Name (Last, First, Middle Initial)
John A Picciotto
Mailing Address 704 Sussex Road
City: Towson | State: MD | Zip Code: 21286
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Evp & General Counsel
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 410.00

Date of Receipt: 08 26 2005
Transaction ID: R41310
Amount of Each Receipt this Period: 15.00
Payroll Deduction

C.
Full Name (Last, First, Middle Initial)
John A Picciotto
Mailing Address 704 Sussex Road
City: Towson | State: MD | Zip Code: 21286
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Evp & General Counsel
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 410.00

Date of Receipt: 09 09 2005
Transaction ID: R41566
Amount of Each Receipt this Period: 15.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **45.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 78 / 110
(check only one)
X 11a | 11b | 11c | 12 | 13 | 14 | 15 | 16 | 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)
CareFirst BlueCross BlueShield Associates' Federal PAC

A.
Full Name (Last, First, Middle Initial)
John A Picciotto
Mailing Address 704 Sussex Road
City: Towson | State: MD | Zip Code: 21286
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Evp & General Counsel
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 410.00

Date of Receipt: 09 23 2005
Transaction ID: R41630
Amount of Each Receipt this Period: 15.00
Payroll Deduction

B.
Full Name (Last, First, Middle Initial)
John A Picciotto
Mailing Address 704 Sussex Road
City: Towson | State: MD | Zip Code: 21286
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Evp & General Counsel
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 410.00

Date of Receipt: 10 07 2005
Transaction ID: R41884
Amount of Each Receipt this Period: 15.00
Payroll Deduction

C.
Full Name (Last, First, Middle Initial)
John A Picciotto
Mailing Address 704 Sussex Road
City: Towson | State: MD | Zip Code: 21286
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Evp & General Counsel
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 410.00

Date of Receipt: 10 21 2005
Transaction ID: R42073
Amount of Each Receipt this Period: 15.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **45.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 79 / 110
(check only one)
X 11a | 11b | 11c | 12 | 13 | 14 | 15 | 16 | 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)
CareFirst BlueCross BlueShield Associates' Federal PAC

A.
Full Name (Last, First, Middle Initial)
John A Picciotto
Mailing Address 704 Sussex Road
City: Towson | State: MD | Zip Code: 21286
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Evp & General Counsel
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 410.00

Date of Receipt: 11 04 2005
Transaction ID: R42325
Amount of Each Receipt this Period: 15.00
Payroll Deduction

B.
Full Name (Last, First, Middle Initial)
John A Picciotto
Mailing Address 704 Sussex Road
City: Towson | State: MD | Zip Code: 21286
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Evp & General Counsel
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 410.00

Date of Receipt: 11 18 2005
Transaction ID: R42451
Amount of Each Receipt this Period: 20.00
Payroll Deduction

C.
Full Name (Last, First, Middle Initial)
John A Picciotto
Mailing Address 704 Sussex Road
City: Towson | State: MD | Zip Code: 21286
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Evp & General Counsel
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 410.00

Date of Receipt: 12 02 2005
Transaction ID: R42638
Amount of Each Receipt this Period: 20.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ 55.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 80 / 110
(check only one)
X 11a | 11b | 11c | 12 | 13 | 14 | 15 | 16 | 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)
CareFirst BlueCross BlueShield Associates' Federal PAC

A.
Full Name (Last, First, Middle Initial)
John A Picciotto
Mailing Address 704 Sussex Road
City: Towson | State: MD | Zip Code: 21286
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Evp & General Counsel
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 410.00

Date of Receipt: 12 16 2005
Transaction ID: R42826
Amount of Each Receipt this Period: 20.00
Payroll Deduction

B.
Full Name (Last, First, Middle Initial)
John A Picciotto
Mailing Address 704 Sussex Road
City: Towson | State: MD | Zip Code: 21286
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Evp & General Counsel
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 410.00

Date of Receipt: 12 30 2005
Transaction ID: R43075
Amount of Each Receipt this Period: 20.00
Payroll Deduction

C.
Full Name (Last, First, Middle Initial)
Joseph G Rampone
Mailing Address 6 Canterbury Court
City: Mendham | State: NJ | Zip Code: 07945
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Svp, Operations
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 287.00

Date of Receipt: 07 01 2005
Transaction ID: R40501
Amount of Each Receipt this Period: 10.50
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **50.50**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 81 / 110
(check only one)
X 11a | 11b | 11c | 12 | 13 | 14 | 15 | 16 | 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)
CareFirst BlueCross BlueShield Associates' Federal PAC

A.
Full Name (Last, First, Middle Initial)
Joseph G Rampone
Mailing Address 6 Canterbury Court
City: Mendham | State: NJ | Zip Code: 07945
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Svp, Operations
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 287.00

Date of Receipt: 07 15 2005
Transaction ID: R40781
Amount of Each Receipt this Period: 10.50
Payroll Deduction

B.
Full Name (Last, First, Middle Initial)
Joseph G Rampone
Mailing Address 6 Canterbury Court
City: Mendham | State: NJ | Zip Code: 07945
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Svp, Operations
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 287.00

Date of Receipt: 07 29 2005
Transaction ID: R40845
Amount of Each Receipt this Period: 10.50
Payroll Deduction

C.
Full Name (Last, First, Middle Initial)
Joseph G Rampone
Mailing Address 6 Canterbury Court
City: Mendham | State: NJ | Zip Code: 07945
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Svp, Operations
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 287.00

Date of Receipt: 08 12 2005
Transaction ID: R41101
Amount of Each Receipt this Period: 10.50
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **31.50**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 82 / 110
(check only one)
X 11a | 11b | 11c | 12 | 13 | 14 | 15 | 16 | 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)
CareFirst BlueCross BlueShield Associates' Federal PAC

A.
Full Name (Last, First, Middle Initial)
Joseph G Rampone
Mailing Address 6 Canterbury Court
City: Mendham | State: NJ | Zip Code: 07945
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Svp, Operations
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 287.00

Date of Receipt: 08 26 2005
Transaction ID: R41326
Amount of Each Receipt this Period: 10.50
Payroll Deduction

B.
Full Name (Last, First, Middle Initial)
Joseph G Rampone
Mailing Address 6 Canterbury Court
City: Mendham | State: NJ | Zip Code: 07945
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Svp, Operations
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 287.00

Date of Receipt: 09 09 2005
Transaction ID: R41582
Amount of Each Receipt this Period: 10.50
Payroll Deduction

C.
Full Name (Last, First, Middle Initial)
Joseph G Rampone
Mailing Address 6 Canterbury Court
City: Mendham | State: NJ | Zip Code: 07945
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Svp, Operations
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 287.00

Date of Receipt: 09 23 2005
Transaction ID: R41646
Amount of Each Receipt this Period: 10.50
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **31.50**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 83 / 110
(check only one)

X 11a | 11b | 11c | 12 | 13 | 14 | 15 | 16 | 17

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NAME OF COMMITTEE (In Full)
CareFirst BlueCross BlueShield Associates' Federal PAC

A.
Full Name (Last, First, Middle Initial)
Joseph G Rampone
Mailing Address 6 Canterbury Court
City: Mendham | State: NJ | Zip Code: 07945
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Svp, Operations
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 287.00

Date of Receipt: 10 07 2005
Transaction ID: R41900
Amount of Each Receipt this Period: 10.50
Payroll Deduction

B.
Full Name (Last, First, Middle Initial)
Joseph G Rampone
Mailing Address 6 Canterbury Court
City: Mendham | State: NJ | Zip Code: 07945
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Svp, Operations
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 287.00

Date of Receipt: 10 21 2005
Transaction ID: R42089
Amount of Each Receipt this Period: 10.50
Payroll Deduction

C.
Full Name (Last, First, Middle Initial)
Joseph G Rampone
Mailing Address 6 Canterbury Court
City: Mendham | State: NJ | Zip Code: 07945
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Svp, Operations
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 287.00

Date of Receipt: 11 04 2005
Transaction ID: R42341
Amount of Each Receipt this Period: 10.50
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **31.50**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 84 / 110
(check only one)

X 11a | 11b | 11c | 12 | 13 | 14 | 15 | 16 | 17

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NAME OF COMMITTEE (In Full)
CareFirst BlueCross BlueShield Associates' Federal PAC

A.
Full Name (Last, First, Middle Initial)
Joseph G Rampone
Mailing Address 6 Canterbury Court
City: Mendham | State: NJ | Zip Code: 07945
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Svp, Operations
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 287.00

Date of Receipt: 11 18 2005
Transaction ID: R42467
Amount of Each Receipt this Period: 14.00
Payroll Deduction

B.
Full Name (Last, First, Middle Initial)
Joseph G Rampone
Mailing Address 6 Canterbury Court
City: Mendham | State: NJ | Zip Code: 07945
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Svp, Operations
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 287.00

Date of Receipt: 12 02 2005
Transaction ID: R42654
Amount of Each Receipt this Period: 14.00
Payroll Deduction

C.
Full Name (Last, First, Middle Initial)
Joseph G Rampone
Mailing Address 6 Canterbury Court
City: Mendham | State: NJ | Zip Code: 07945
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Svp, Operations
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 287.00

Date of Receipt: 12 16 2005
Transaction ID: R42842
Amount of Each Receipt this Period: 14.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **42.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 85 / 110
(check only one)

X 11a | 11b | 11c | 12 | 13 | 14 | 15 | 16 | 17

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NAME OF COMMITTEE (In Full)
CareFirst BlueCross BlueShield Associates' Federal PAC

A. Full Name (Last, First, Middle Initial)
Joseph G Rampone
Mailing Address 8 Canterbury Court
City: Mendham | State: NJ | Zip Code: 07945
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Svp, Operations
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 287.00
Date of Receipt: 12 30 2005
Transaction ID: R43091
Amount of Each Receipt this Period: 14.00
Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Gwendolyn D Skillern
Mailing Address 9925 Middle Mill Dr.
City: Owings Mills | State: MD | Zip Code: 21117
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Svp, Audit
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 246.00
Date of Receipt: 07 01 2005
Transaction ID: R40486
Amount of Each Receipt this Period: 9.00
Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Gwendolyn D Skillern
Mailing Address 9925 Middle Mill Dr.
City: Owings Mills | State: MD | Zip Code: 21117
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Svp, Audit
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 246.00
Date of Receipt: 07 15 2005
Transaction ID: R40778
Amount of Each Receipt this Period: 9.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **32.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 86 / 110
(check only one)

X 11a | 11b | 11c | 12 | 13 | 14 | 15 | 16 | 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)
CareFirst BlueCross BlueShield Associates' Federal PAC

A.
Full Name (Last, First, Middle Initial)
Gwendolyn D Skillern
Mailing Address 9925 Middle Mill Dr.
City: Owings Mills | State: MD | Zip Code: 21117
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Svp, Audit
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 246.00

Date of Receipt: 07 29 2005
Transaction ID: R40842
Amount of Each Receipt this Period: 9.00
Payroll Deduction

B.
Full Name (Last, First, Middle Initial)
Gwendolyn D Skillern
Mailing Address 9925 Middle Mill Dr.
City: Owings Mills | State: MD | Zip Code: 21117
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Svp, Audit
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 246.00

Date of Receipt: 08 12 2005
Transaction ID: R41098
Amount of Each Receipt this Period: 9.00
Payroll Deduction

C.
Full Name (Last, First, Middle Initial)
Gwendolyn D Skillern
Mailing Address 9925 Middle Mill Dr.
City: Owings Mills | State: MD | Zip Code: 21117
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Svp, Audit
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 246.00

Date of Receipt: 08 26 2005
Transaction ID: R41323
Amount of Each Receipt this Period: 9.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **27.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 87 / 110
(check only one)
X 11a | 11b | 11c | 12 | 13 | 14 | 15 | 16 | 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)
CareFirst BlueCross BlueShield Associates' Federal PAC

A.
Full Name (Last, First, Middle Initial)
Gwendolyn D Skillern
Mailing Address 9925 Middle Mill Dr.
City: Owings Mills | State: MD | Zip Code: 21117
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Svp, Audit
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 246.00

Date of Receipt: 09 09 2005
Transaction ID: R41579
Amount of Each Receipt this Period: 9.00
Payroll Deduction

B.
Full Name (Last, First, Middle Initial)
Gwendolyn D Skillern
Mailing Address 9925 Middle Mill Dr.
City: Owings Mills | State: MD | Zip Code: 21117
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Svp, Audit
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 246.00

Date of Receipt: 09 23 2005
Transaction ID: R41643
Amount of Each Receipt this Period: 9.00
Payroll Deduction

C.
Full Name (Last, First, Middle Initial)
Gwendolyn D Skillern
Mailing Address 9925 Middle Mill Dr.
City: Owings Mills | State: MD | Zip Code: 21117
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Svp, Audit
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 246.00

Date of Receipt: 10 07 2005
Transaction ID: R41897
Amount of Each Receipt this Period: 9.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **27.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 88 / 110
(check only one)
X 11a | 11b | 11c | 12 | 13 | 14 | 15 | 16 | 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)
CareFirst BlueCross BlueShield Associates' Federal PAC

A.
Full Name (Last, First, Middle Initial)
Gwendolyn D Skillern
Mailing Address 9925 Middle Mill Dr.
City: Owings Mills | State: MD | Zip Code: 21117
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Svp, Audit
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 246.00

Date of Receipt: 10 21 2005
Transaction ID: R42086
Amount of Each Receipt this Period: 9.00
Payroll Deduction

B.
Full Name (Last, First, Middle Initial)
Gwendolyn D Skillern
Mailing Address 9925 Middle Mill Dr.
City: Owings Mills | State: MD | Zip Code: 21117
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Svp, Audit
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 246.00

Date of Receipt: 11 04 2005
Transaction ID: R42338
Amount of Each Receipt this Period: 9.00
Payroll Deduction

C.
Full Name (Last, First, Middle Initial)
Gwendolyn D Skillern
Mailing Address 9925 Middle Mill Dr.
City: Owings Mills | State: MD | Zip Code: 21117
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Svp, Audit
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 246.00

Date of Receipt: 11 18 2005
Transaction ID: R42464
Amount of Each Receipt this Period: 12.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **30.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 89 / 110
(check only one)
X 11a | 11b | 11c | 12 | 13 | 14 | 15 | 16 | 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)
CareFirst BlueCross BlueShield Associates' Federal PAC

A.
Full Name (Last, First, Middle Initial)
Gwendolyn D Skillern
Mailing Address 9925 Middle Mill Dr.
City: Owings Mills | State: MD | Zip Code: 21117
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Svp, Audit
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 246.00

Date of Receipt: 12 02 2005
Transaction ID: R42651
Amount of Each Receipt this Period: 12.00
Payroll Deduction

B.
Full Name (Last, First, Middle Initial)
Gwendolyn D Skillern
Mailing Address 9925 Middle Mill Dr.
City: Owings Mills | State: MD | Zip Code: 21117
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Svp, Audit
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 246.00

Date of Receipt: 12 16 2005
Transaction ID: R42839
Amount of Each Receipt this Period: 12.00
Payroll Deduction

C.
Full Name (Last, First, Middle Initial)
Gwendolyn D Skillern
Mailing Address 9925 Middle Mill Dr.
City: Owings Mills | State: MD | Zip Code: 21117
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Svp, Audit
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 246.00

Date of Receipt: 12 30 2005
Transaction ID: R43088
Amount of Each Receipt this Period: 12.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **36.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 90 / 110
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X 11a | 11b | 11c | 12 | 13 | 14 | 15 | 16 | 17

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NAME OF COMMITTEE (In Full)
CareFirst BlueCross BlueShield Associates' Federal PAC

A.
Full Name (Last, First, Middle Initial)
C. Shekar Subramaniam
Mailing Address 9801 Eagle Court
City: Ellicott City | State: MD | Zip Code: 21042
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Avp, Broker Sales
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 205.00

Date of Receipt: 07 01 2005
Transaction ID: R40514
Amount of Each Receipt this Period: 7.50
Payroll Deduction

B.
Full Name (Last, First, Middle Initial)
C. Shekar Subramaniam
Mailing Address 9801 Eagle Court
City: Ellicott City | State: MD | Zip Code: 21042
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Avp, Broker Sales
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 205.00

Date of Receipt: 07 15 2005
Transaction ID: R40794
Amount of Each Receipt this Period: 7.50
Payroll Deduction

C.
Full Name (Last, First, Middle Initial)
C. Shekar Subramaniam
Mailing Address 9801 Eagle Court
City: Ellicott City | State: MD | Zip Code: 21042
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Avp, Broker Sales
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 205.00

Date of Receipt: 07 29 2005
Transaction ID: R40858
Amount of Each Receipt this Period: 7.50
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **22.50**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 91 / 110
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X 11a | 11b | 11c | 12 | 13 | 14 | 15 | 16 | 17

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NAME OF COMMITTEE (In Full)
CareFirst BlueCross BlueShield Associates' Federal PAC

A.
Full Name (Last, First, Middle Initial)
C. Shekar Subramaniam
Mailing Address 9601 Eagle Court
City: Ellicott City | State: MD | Zip Code: 21042
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Avp, Broker Sales
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 205.00

Date of Receipt: 08 12 2005
Transaction ID: R41114
Amount of Each Receipt this Period: 7.50
Payroll Deduction

B.
Full Name (Last, First, Middle Initial)
C. Shekar Subramaniam
Mailing Address 9601 Eagle Court
City: Ellicott City | State: MD | Zip Code: 21042
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Avp, Broker Sales
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 205.00

Date of Receipt: 08 26 2005
Transaction ID: R41286
Amount of Each Receipt this Period: 7.50
Payroll Deduction

C.
Full Name (Last, First, Middle Initial)
C. Shekar Subramaniam
Mailing Address 9601 Eagle Court
City: Ellicott City | State: MD | Zip Code: 21042
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Avp, Broker Sales
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 205.00

Date of Receipt: 09 09 2005
Transaction ID: R41542
Amount of Each Receipt this Period: 7.50
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **22.50**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 92 / 110
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X 11a | 11b | 11c | 12 | 13 | 14 | 15 | 16 | 17

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NAME OF COMMITTEE (In Full)
CareFirst BlueCross BlueShield Associates' Federal PAC

A.
Full Name (Last, First, Middle Initial)
C. Shekar Subramaniam
Mailing Address 9801 Eagle Court
City: Ellicott City | State: MD | Zip Code: 21042
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Avp, Broker Sales
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 205.00

Date of Receipt: 09 23 2005
Transaction ID: R41606
Amount of Each Receipt this Period: 7.50
Payroll Deduction

B.
Full Name (Last, First, Middle Initial)
C. Shekar Subramaniam
Mailing Address 9801 Eagle Court
City: Ellicott City | State: MD | Zip Code: 21042
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Avp, Broker Sales
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 205.00

Date of Receipt: 10 07 2005
Transaction ID: R41861
Amount of Each Receipt this Period: 7.50
Payroll Deduction

C.
Full Name (Last, First, Middle Initial)
C. Shekar Subramaniam
Mailing Address 9801 Eagle Court
City: Ellicott City | State: MD | Zip Code: 21042
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Avp, Broker Sales
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 205.00

Date of Receipt: 10 21 2005
Transaction ID: R42050
Amount of Each Receipt this Period: 7.50
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **22.50**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 93 / 110
(check only one)
X 11a | 11b | 11c | 12 | 13 | 14 | 15 | 16 | 17

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NAME OF COMMITTEE (In Full)
CareFirst BlueCross BlueShield Associates' Federal PAC

A.
Full Name (Last, First, Middle Initial)
C. Shekar Subramaniam
Mailing Address 9801 Eagle Court
City: Ellicott City | State: MD | Zip Code: 21042
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Avp, Broker Sales
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 205.00

Date of Receipt: 11 04 2005
Transaction ID: R42302
Amount of Each Receipt this Period: 7.50
Payroll Deduction

B.
Full Name (Last, First, Middle Initial)
C. Shekar Subramaniam
Mailing Address 9801 Eagle Court
City: Ellicott City | State: MD | Zip Code: 21042
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Avp, Broker Sales
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 205.00

Date of Receipt: 11 18 2005
Transaction ID: R42428
Amount of Each Receipt this Period: 10.00
Payroll Deduction

C.
Full Name (Last, First, Middle Initial)
C. Shekar Subramaniam
Mailing Address 9801 Eagle Court
City: Ellicott City | State: MD | Zip Code: 21042
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Avp, Broker Sales
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 205.00

Date of Receipt: 12 02 2005
Transaction ID: R42615
Amount of Each Receipt this Period: 10.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **27.50**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 94 / 110
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X 11a | 11b | 11c | 12 | 13 | 14 | 15 | 16 | 17

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NAME OF COMMITTEE (In Full)
CareFirst BlueCross BlueShield Associates' Federal PAC

A.
Full Name (Last, First, Middle Initial)
C. Shekar Subramaniam
Mailing Address 9601 Eagle Court
City: Ellicott City | State: MD | Zip Code: 21042
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Avp, Broker Sales
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 205.00

Date of Receipt: 12 16 2005
Transaction ID: R42803
Amount of Each Receipt this Period: 10.00
Payroll Deduction

B.
Full Name (Last, First, Middle Initial)
C. Shekar Subramaniam
Mailing Address 9601 Eagle Court
City: Ellicott City | State: MD | Zip Code: 21042
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Avp, Broker Sales
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 205.00

Date of Receipt: 12 30 2005
Transaction ID: R43051
Amount of Each Receipt this Period: 10.00
Payroll Deduction

C.
Full Name (Last, First, Middle Initial)
Sheron J Vecchioni
Mailing Address 13003 Jerome Jay Drive
City: Hunt Valley | State: MD | Zip Code: 21030
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Evp, Chief of Staff
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 328.00

Date of Receipt: 07 01 2005
Transaction ID: R40483
Amount of Each Receipt this Period: 12.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **32.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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FOR LINE NUMBER: PAGE 95 / 110
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X 11a | 11b | 11c | 12 | 13 | 14 | 15 | 16 | 17

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NAME OF COMMITTEE (In Full)
CareFirst BlueCross BlueShield Associates' Federal PAC

A. Full Name (Last, First, Middle Initial)
Sharon J Vecchioni
Mailing Address 13003 Jerome Jay Drive
City: Hunt Valley | State: MD | Zip Code: 21030
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Evp, Chief of Staff
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 328.00
Date of Receipt: 07 15 2005
Transaction ID: R40763
Amount of Each Receipt this Period: 12.00
Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Sharon J Vecchioni
Mailing Address 13003 Jerome Jay Drive
City: Hunt Valley | State: MD | Zip Code: 21030
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Evp, Chief of Staff
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 328.00
Date of Receipt: 07 29 2005
Transaction ID: R40827
Amount of Each Receipt this Period: 12.00
Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Sharon J Vecchioni
Mailing Address 13003 Jerome Jay Drive
City: Hunt Valley | State: MD | Zip Code: 21030
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Evp, Chief of Staff
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 328.00
Date of Receipt: 08 12 2005
Transaction ID: R41083
Amount of Each Receipt this Period: 12.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **36.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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FOR LINE NUMBER: PAGE 96 / 110
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X 11a | 11b | 11c | 12 | 13 | 14 | 15 | 16 | 17

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NAME OF COMMITTEE (In Full)
CareFirst BlueCross BlueShield Associates' Federal PAC

A.
Full Name (Last, First, Middle Initial)
Sharon J Vecchioni
Mailing Address 13003 Jerome Jay Drive
City: Hunt Valley | State: MD | Zip Code: 21030
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Evp, Chief of Staff
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 328.00
Date of Receipt: 08 26 2005
Transaction ID: R41308
Amount of Each Receipt this Period: 12.00
Payroll Deduction

B.
Full Name (Last, First, Middle Initial)
Sharon J Vecchioni
Mailing Address 13003 Jerome Jay Drive
City: Hunt Valley | State: MD | Zip Code: 21030
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Evp, Chief of Staff
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 328.00
Date of Receipt: 09 09 2005
Transaction ID: R41564
Amount of Each Receipt this Period: 12.00
Payroll Deduction

C.
Full Name (Last, First, Middle Initial)
Sharon J Vecchioni
Mailing Address 13003 Jerome Jay Drive
City: Hunt Valley | State: MD | Zip Code: 21030
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Evp, Chief of Staff
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 328.00
Date of Receipt: 09 23 2005
Transaction ID: R41628
Amount of Each Receipt this Period: 12.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **36.00**

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SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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FOR LINE NUMBER: PAGE 97 / 110
(check only one)
X 11a | 11b | 11c | 12 | 13 | 14 | 15 | 16 | 17

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NAME OF COMMITTEE (In Full)
CareFirst BlueCross BlueShield Associates' Federal PAC

A.
Full Name (Last, First, Middle Initial)
Sharon J Vecchioni
Mailing Address 13003 Jerome Jay Drive
City: Hunt Valley | State: MD | Zip Code: 21030
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Evp, Chief of Staff
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 328.00

Date of Receipt: 10 07 2005
Transaction ID: R41882
Amount of Each Receipt this Period: 12.00
Payroll Deduction

B.
Full Name (Last, First, Middle Initial)
Sharon J Vecchioni
Mailing Address 13003 Jerome Jay Drive
City: Hunt Valley | State: MD | Zip Code: 21030
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Evp, Chief of Staff
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 328.00

Date of Receipt: 10 21 2005
Transaction ID: R42071
Amount of Each Receipt this Period: 12.00
Payroll Deduction

C.
Full Name (Last, First, Middle Initial)
Sharon J Vecchioni
Mailing Address 13003 Jerome Jay Drive
City: Hunt Valley | State: MD | Zip Code: 21030
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Evp, Chief of Staff
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 328.00

Date of Receipt: 11 04 2005
Transaction ID: R42323
Amount of Each Receipt this Period: 12.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **36.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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FOR LINE NUMBER: PAGE 98 / 110
(check only one)

X 11a | 11b | 11c | 12 | 13 | 14 | 15 | 16 | 17

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NAME OF COMMITTEE (In Full)
CareFirst BlueCross BlueShield Associates' Federal PAC

A.
Full Name (Last, First, Middle Initial)
Sharon J Vecchioni
Mailing Address 13003 Jerome Jay Drive
City: Hunt Valley | State: MD | Zip Code: 21030
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Evp, Chief of Staff
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 328.00

Date of Receipt: 11 / 18 / 2005
Transaction ID: R42449
Amount of Each Receipt this Period: 16.00
Payroll Deduction

B.
Full Name (Last, First, Middle Initial)
Sharon J Vecchioni
Mailing Address 13003 Jerome Jay Drive
City: Hunt Valley | State: MD | Zip Code: 21030
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Evp, Chief of Staff
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 328.00

Date of Receipt: 12 / 02 / 2005
Transaction ID: R42636
Amount of Each Receipt this Period: 16.00
Payroll Deduction

C.
Full Name (Last, First, Middle Initial)
Sharon J Vecchioni
Mailing Address 13003 Jerome Jay Drive
City: Hunt Valley | State: MD | Zip Code: 21030
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Evp, Chief of Staff
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 328.00

Date of Receipt: 12 / 16 / 2005
Transaction ID: R42824
Amount of Each Receipt this Period: 16.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **48.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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FOR LINE NUMBER: PAGE 99 / 110
(check only one)
X 11a | 11b | 11c | 12 | 13 | 14 | 15 | 16 | 17

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NAME OF COMMITTEE (In Full)
CareFirst BlueCross BlueShield Associates' Federal PAC

A.
Full Name (Last, First, Middle Initial)
Sharon J Vecchioni
Mailing Address 13003 Jerome Jay Drive
City: Hunt Valley | State: MD | Zip Code: 21030
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Evp, Chief of Staff
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 328.00

Date of Receipt: 12 30 2005
Transaction ID: R43073
Amount of Each Receipt this Period: 16.00
Payroll Deduction

B.
Full Name (Last, First, Middle Initial)
David D Wolf
Mailing Address 2337-1 Boston St
City: Baltimore | State: MD | Zip Code: 21224
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Evp, Medical Systems
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 410.00

Date of Receipt: 07 01 2005
Transaction ID: R40467
Amount of Each Receipt this Period: 15.00
Payroll Deduction

C.
Full Name (Last, First, Middle Initial)
David D Wolf
Mailing Address 2337-1 Boston St
City: Baltimore | State: MD | Zip Code: 21224
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Evp, Medical Systems
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 410.00

Date of Receipt: 07 15 2005
Transaction ID: R40767
Amount of Each Receipt this Period: 15.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **46.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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FOR LINE NUMBER: PAGE 100 / 110
(check only one)

X 11a | 11b | 11c | 12 | 13 | 14 | 15 | 16 | 17

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NAME OF COMMITTEE (In Full)
CareFirst BlueCross BlueShield Associates' Federal PAC

A.
Full Name (Last, First, Middle Initial)
David D Wolf
Mailing Address 2337-1 Boston St
City: Baltimore | State: MD | Zip Code: 21224
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Evp, Medical Systems
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 410.00

Date of Receipt: 07 29 2005
Transaction ID: R40831
Amount of Each Receipt this Period: 15.00
Payroll Deduction

B.
Full Name (Last, First, Middle Initial)
David D Wolf
Mailing Address 2337-1 Boston St
City: Baltimore | State: MD | Zip Code: 21224
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Evp, Medical Systems
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 410.00

Date of Receipt: 08 12 2005
Transaction ID: R41087
Amount of Each Receipt this Period: 15.00
Payroll Deduction

C.
Full Name (Last, First, Middle Initial)
David D Wolf
Mailing Address 2337-1 Boston St
City: Baltimore | State: MD | Zip Code: 21224
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Evp, Medical Systems
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 410.00

Date of Receipt: 08 26 2005
Transaction ID: R41312
Amount of Each Receipt this Period: 15.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **45.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 101 / 110
(check only one)

X 11a | 11b | 11c | 12 | 13 | 14 | 15 | 16 | 17

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NAME OF COMMITTEE (In Full)
CareFirst BlueCross BlueShield Associates' Federal PAC

A.
Full Name (Last, First, Middle Initial)
David D Wolf
Mailing Address 2337-1 Boston St
City: Baltimore | State: MD | Zip Code: 21224
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Evp, Medical Systems
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 410.00

Date of Receipt: 09 09 2005
Transaction ID: R41586
Amount of Each Receipt this Period: 15.00
Payroll Deduction

B.
Full Name (Last, First, Middle Initial)
David D Wolf
Mailing Address 2337-1 Boston St
City: Baltimore | State: MD | Zip Code: 21224
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Evp, Medical Systems
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 410.00

Date of Receipt: 09 23 2005
Transaction ID: R41632
Amount of Each Receipt this Period: 15.00
Payroll Deduction

C.
Full Name (Last, First, Middle Initial)
David D Wolf
Mailing Address 2337-1 Boston St
City: Baltimore | State: MD | Zip Code: 21224
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Evp, Medical Systems
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 410.00

Date of Receipt: 10 07 2005
Transaction ID: R41886
Amount of Each Receipt this Period: 15.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **45.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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FOR LINE NUMBER: PAGE 102 / 110
(check only one)

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NAME OF COMMITTEE (In Full)
CareFirst BlueCross BlueShield Associates' Federal PAC

A.
Full Name (Last, First, Middle Initial)
David D Wolf
Mailing Address 2337-1 Boston St
City: Baltimore | State: MD | Zip Code: 21224
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Evp, Medical Systems
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 410.00

Date of Receipt: 10 21 2005
Transaction ID: R42075
Amount of Each Receipt this Period: 15.00
Payroll Deduction

B.
Full Name (Last, First, Middle Initial)
David D Wolf
Mailing Address 2337-1 Boston St
City: Baltimore | State: MD | Zip Code: 21224
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Evp, Medical Systems
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 410.00

Date of Receipt: 11 04 2005
Transaction ID: R42327
Amount of Each Receipt this Period: 15.00
Payroll Deduction

C.
Full Name (Last, First, Middle Initial)
David D Wolf
Mailing Address 2337-1 Boston St
City: Baltimore | State: MD | Zip Code: 21224
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Evp, Medical Systems
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 410.00

Date of Receipt: 11 18 2005
Transaction ID: R42453
Amount of Each Receipt this Period: 20.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **50.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 103 / 110
(check only one)

X 11a | 11b | 11c | 12 | 13 | 14 | 15 | 16 | 17

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NAME OF COMMITTEE (In Full)
CareFirst BlueCross BlueShield Associates' Federal PAC

A.
Full Name (Last, First, Middle Initial)
David D Wolf
Mailing Address 2337-1 Boston St
City: Baltimore | State: MD | Zip Code: 21224
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Evp, Medical Systems
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 410.00

Date of Receipt: 12 02 2005
Transaction ID: R42640
Amount of Each Receipt this Period: 20.00
Payroll Deduction

B.
Full Name (Last, First, Middle Initial)
David D Wolf
Mailing Address 2337-1 Boston St
City: Baltimore | State: MD | Zip Code: 21224
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Evp, Medical Systems
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 410.00

Date of Receipt: 12 16 2005
Transaction ID: R42828
Amount of Each Receipt this Period: 20.00
Payroll Deduction

C.
Full Name (Last, First, Middle Initial)
David D Wolf
Mailing Address 2337-1 Boston St
City: Baltimore | State: MD | Zip Code: 21224
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Evp, Medical Systems
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 410.00

Date of Receipt: 12 30 2005
Transaction ID: R43077
Amount of Each Receipt this Period: 20.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **60.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 104 / 110
(check only one)

X 11a | 11b | 11c | 12 | 13 | 14 | 15 | 16 | 17

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NAME OF COMMITTEE (In Full)
CareFirst BlueCross BlueShield Associates' Federal PAC

A.
Full Name (Last, First, Middle Initial)
Winston Wong
Mailing Address 1998 Conan Doyle Way
City: Eldersburg | State: MD | Zip Code: 21784
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Avp, Pharmacy
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 205.00

Date of Receipt: 07 01 2005
Transaction ID: R40529
Amount of Each Receipt this Period: 7.50
Payroll Deduction

B.
Full Name (Last, First, Middle Initial)
Winston Wong
Mailing Address 1998 Conan Doyle Way
City: Eldersburg | State: MD | Zip Code: 21784
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Avp, Pharmacy
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 205.00

Date of Receipt: 07 15 2005
Transaction ID: R40809
Amount of Each Receipt this Period: 7.50
Payroll Deduction

C.
Full Name (Last, First, Middle Initial)
Winston Wong
Mailing Address 1998 Conan Doyle Way
City: Eldersburg | State: MD | Zip Code: 21784
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Avp, Pharmacy
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 205.00

Date of Receipt: 07 29 2005
Transaction ID: R40873
Amount of Each Receipt this Period: 7.50
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **22.50**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 105 / 110
(check only one)

X 11a | 11b | 11c | 12 | 13 | 14 | 15 | 16 | 17

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NAME OF COMMITTEE (In Full)
CareFirst BlueCross BlueShield Associates' Federal PAC

A.
Full Name (Last, First, Middle Initial)
Winston Wong
Mailing Address 1998 Conan Doyle Way
City: Eldersburg | State: MD | Zip Code: 21784
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Avp, Pharmacy
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 205.00

Date of Receipt: 08 12 2005
Transaction ID: R41129
Amount of Each Receipt this Period: 7.50
Payroll Deduction

B.
Full Name (Last, First, Middle Initial)
Winston Wong
Mailing Address 1998 Conan Doyle Way
City: Eldersburg | State: MD | Zip Code: 21784
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Avp, Pharmacy
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 205.00

Date of Receipt: 08 26 2005
Transaction ID: R41301
Amount of Each Receipt this Period: 7.50
Payroll Deduction

C.
Full Name (Last, First, Middle Initial)
Winston Wong
Mailing Address 1998 Conan Doyle Way
City: Eldersburg | State: MD | Zip Code: 21784
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Avp, Pharmacy
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 205.00

Date of Receipt: 09 09 2005
Transaction ID: R41557
Amount of Each Receipt this Period: 7.50
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **22.50**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 106 / 110
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X 11a | 11b | 11c | 12 | 13 | 14 | 15 | 16 | 17

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NAME OF COMMITTEE (In Full)
CareFirst BlueCross BlueShield Associates' Federal PAC

A.
Full Name (Last, First, Middle Initial)
Winston Wong
Mailing Address 1998 Conan Doyle Way
City: Eldersburg | State: MD | Zip Code: 21784
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Avp, Pharmacy
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 205.00

Date of Receipt: 09 23 2005
Transaction ID: R41621
Amount of Each Receipt this Period: 7.50
Payroll Deduction

B.
Full Name (Last, First, Middle Initial)
Winston Wong
Mailing Address 1998 Conan Doyle Way
City: Eldersburg | State: MD | Zip Code: 21784
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Avp, Pharmacy
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 205.00

Date of Receipt: 10 07 2005
Transaction ID: R41875
Amount of Each Receipt this Period: 7.50
Payroll Deduction

C.
Full Name (Last, First, Middle Initial)
Winston Wong
Mailing Address 1998 Conan Doyle Way
City: Eldersburg | State: MD | Zip Code: 21784
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Avp, Pharmacy
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 205.00

Date of Receipt: 10 21 2005
Transaction ID: R42084
Amount of Each Receipt this Period: 7.50
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **22.50**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 107 / 110
(check only one)

X 11a | 11b | 11c | 12 | 13 | 14 | 15 | 16 | 17

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NAME OF COMMITTEE (In Full)
CareFirst BlueCross BlueShield Associates' Federal PAC

A.
Full Name (Last, First, Middle Initial)
Winston Wong
Mailing Address 1998 Conan Doyle Way
City: Eldersburg | State: MD | Zip Code: 21784
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Avp, Pharmacy
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 205.00

Date of Receipt: 11 04 2005
Transaction ID: R42316
Amount of Each Receipt this Period: 7.50
Payroll Deduction

B.
Full Name (Last, First, Middle Initial)
Winston Wong
Mailing Address 1998 Conan Doyle Way
City: Eldersburg | State: MD | Zip Code: 21784
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Avp, Pharmacy
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 205.00

Date of Receipt: 11 18 2005
Transaction ID: R42442
Amount of Each Receipt this Period: 10.00
Payroll Deduction

C.
Full Name (Last, First, Middle Initial)
Winston Wong
Mailing Address 1998 Conan Doyle Way
City: Eldersburg | State: MD | Zip Code: 21784
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Avp, Pharmacy
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 205.00

Date of Receipt: 12 02 2005
Transaction ID: R42629
Amount of Each Receipt this Period: 10.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **27.50**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 108 / 110
(check only one)

X 11a | 11b | 11c | 12 | 13 | 14 | 15 | 16 | 17

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NAME OF COMMITTEE (In Full)
CareFirst BlueCross BlueShield Associates' Federal PAC

A.
Full Name (Last, First, Middle Initial)
Winston Wong
Mailing Address 1998 Conan Doyle Way
City: Eldersburg | State: MD | Zip Code: 21784
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Avp, Pharmacy
Receipt For: Primary General; Other (specify)
Aggregate Year-to-Date: 205.00

Date of Receipt: 12 16 2005
Transaction ID: R42617
Amount of Each Receipt this Period: 10.00
Payroll Deduction

B.
Full Name (Last, First, Middle Initial)
Winston Wong
Mailing Address 1998 Conan Doyle Way
City: Eldersburg | State: MD | Zip Code: 21784
FEC ID number of contributing federal political committee: C
Name of Employer: Carefirst of Maryland, Inc
Occupation: Avp, Pharmacy
Receipt For: Primary General; Other (specify)
Aggregate Year-to-Date: 205.00

Date of Receipt: 12 30 2005
Transaction ID: R43065
Amount of Each Receipt this Period: 10.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶	20.00
TOTAL This Period (last page this line number only) ▶	3477.00

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)

☐ 21b	☒ 22	☐ 23	☐ 24	☐ 25	☐ 26	
☐ 27	☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b	

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NAME OF COMMITTEE (In Full)
CareFirst BlueCross BlueShield Associates' Federal PAC

A. Full Name (Last, First, Middle Initial)
BluePAC

Mailing Address 1310 G Street NW

City: Washington, | State: DC | Zip Code: 20005

Purpose of Disbursement: Contribution Affiliated PAC

Candidate Name

Category/ Type

Office Sought: ☐ House ☐ Senate ☐ President

State: District:

Disbursement For: ☐ Primary ☐ General ☐ Other (specify)

Transaction ID: D1003
Date of Disbursement: 07 / 25 / 2005

Amount of Each Disbursement this Period: 2000.00

B. Full Name (Last, First, Middle Initial)
BluePAC

Mailing Address 1310 G Street NW

City: Washington, | State: DC | Zip Code: 20005

Purpose of Disbursement: Contribution Affiliated PAC

Candidate Name

Category/ Type

Office Sought: ☐ House ☐ Senate ☐ President

State: District:

Disbursement For: ☐ Primary ☐ General ☐ Other (specify)

Transaction ID: D1068
Date of Disbursement: 11 / 10 / 2005

Amount of Each Disbursement this Period: 2500.00

C. Full Name (Last, First, Middle Initial)
BluePAC

Mailing Address 1310 G Street NW

City: Washington, | State: DC | Zip Code: 20005

Purpose of Disbursement: Contribution Affiliated PAC

Candidate Name

Category/ Type

Office Sought: ☐ House ☐ Senate ☐ President

State: District:

Disbursement For: ☐ Primary ☐ General ☐ Other (specify)

Transaction ID: D1089
Date of Disbursement: 12 / 15 / 2005

Amount of Each Disbursement this Period: 1000.00

SUBTOTAL of Disbursements This Page (optional) ▶	**5500.00**
TOTAL This Period (last page this line number only) ▶	**5500.00**

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)

☐ 21b	☐ 22	☒ 23	☐ 24	☐ 25	☐ 26
☐ 27	☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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NAME OF COMMITTEE (In Full)
CareFirst BlueCross BlueShield Associates' Federal PAC

A. Full Name (Last, First, Middle Initial)
Dutch Ruppersburger for Congress

Mailing Address 499 South Capitol Street SW Suite

City: Washington | State: DC | Zip Code: 20003

Purpose of Disbursement: Contr.

Candidate Name: RUPPERSBERGER

Category/ Type:

Office Sought: X House / Senate / President

State: MD District: 02

Disbursement For: 2006 — X Primary / General / Other (specify)

Transaction ID: D1062
Date of Disbursement: 11 / 07 / 2005

Amount of Each Disbursement this Period: 1000.00

B. Full Name (Last, First, Middle Initial)
Hoyer for Congress Committee

Mailing Address 7905 Malcolm Road
Suite 102

City: Clinton | State: MD | Zip Code: 20735

Purpose of Disbursement: Contr.

Candidate Name: Steny H. Hoyer

Category/ Type:

Office Sought: X House / Senate / President

State: MD District: 05

Disbursement For: 2006 — X Primary / General / Other (specify)

Transaction ID: D1030
Date of Disbursement: 09 / 13 / 2005

Amount of Each Disbursement this Period: 1000.00

C. Full Name (Last, First, Middle Initial)
Paula Hollinger for Congress

Mailing Address David Uhlfelder, Treasurer
P O Box 5861

City: Baltimore | State: MD | Zip Code: 21282-5861

Purpose of Disbursement: Contr.

Candidate Name: Paula Hollinger

Category/ Type:

Office Sought: House / X Senate / President

State: MD District:

Disbursement For: 2006 — X Primary / General / Other (specify)

Transaction ID: D1044
Date of Disbursement: 09 / 27 / 2005

Amount of Each Disbursement this Period: 500.00

SUBTOTAL of Disbursements This Page (optional) ▶	**2500.00**
TOTAL This Period (last page this line number only) ▶	**2500.00**