

**FEC
FORM 3X**

**REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines
Blue Cross and Blue Shield of Kansas Employee PAC FKA Carepac of Kansas

ADDRESS (number and street) **Check if different than previously reported. (ACC)**
1133 SW Topeka Blvd
Mailstop 803C2
Topeka KS 66629-0001

2. **FEC IDENTIFICATION NUMBER** CITY STATE ZIP CODE

C00197202 3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One)	(b) Monthly Report Due On:	Feb 20 (M2)	May 20 (M5)	Aug 20 (M8)	Nov 20 (M11) (Non-Election Year Only)
(a) Quarterly Reports:		Mar 20 (M3)	Jun 20 (M6)	Sep 20 (M9)	Dec 20 (M12) (Non-Election Year Only)
April 15 Quarterly Report(Q1)		Apr 20 (M4)	Jul 20 (M7)	Oct 20 (M10)	Jan 31 (M13)
July 15 Quarterly Report(Q2)	(c) 12-Day PRE-Election Report for the:		Primary (12P)	General (12G)	Runoff (12R)
October 15 Quarterly Report(Q3)			Convention (12C)	Special (12S)	
<input checked="" type="checkbox"/> January 31 Quarterly Report(YE)		Election on			in the State of
July 31 Mid-Year Report(Non-election Year Only) (MY)	(d) 30-Day Post -Election Report for the:		General (30G)	Runoff (30R)	Special (30S)
Termination Report (TER)		Election on			in the State of

5. Covering Period 07 01 2001 through 12 31 2001

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 Janet M. Blakesley

Signature of Treasurer Electronically Filed by Janet M. Blakesley Date 01 29 2002

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Revised 1/2001)

Page 2

Write or Type Committee Name
Blue Cross and Blue Shield of Kansas Employee PAC FKA Carepac of Kansas

Report Covering the Period: From: ^h07 ^D01 ^v2001 To: ^h12 ^D31 ^v2001

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 ^v 2001		2115.02
(b) Cash on Hand at Beginning of Reporting Period	6617.99	
(c) Total Receipts (from Line 19)	8441.94	16994.91
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	15059.93	19109.93
7. Total Disbursements (from Line 30)	8189.11	12239.11
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	6870.82	6870.82
9. Debts and Obligations owed TO the committee (itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations owed BY the committee (itemize all on Schedule C and/or Schedule D)	0.00	

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

For further information contact:

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

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

**DETAILED SUMMARY PAGE
OF RECEIPTS**

FEC Form 3X (Revised 1/2001)

Page 3

Write or Type Committee Name

Blue Cross and Blue Shield of Kansas Employee PAC FKA Carepac of Kansas

Report Covering the Period: From: ^{MM}07 ^{DD}01 ^{YYYY}2001 To: ^{MM}12 ^{DD}31 ^{YYYY}2001

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)	3809.00	
(ii) Unitemized	4608.75	
(iii) TOTAL (add Lines 11(a)(i) and (ii)	8417.75	16950.00
(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 32, page 4)	8417.75	16950.00
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 36, page 4)	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.)	24.19	44.91
18. Transfers from Nonfederal Account for Joint Activity	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18)	8441.94	16994.91
20. Total Federal Receipts (subtract Line 18 from Line 19)	8441.94	16994.91

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Revised 1/2001)

Page 4

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.....	3810.00	7620.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
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.....	4379.11	4619.11
30. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), and 29)..... ▶	8189.11	12239.11
31. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30)..... ▶	8189.11	12239.11
<hr/>		
III. Net Contributions/Operating Expenditures		
32. Total Contributions (other than loans) from Line 11(d), page 3).....	8417.75	16950.00
33. Total Contribution Refunds (from Line 28(d)).....	0.00	0.00
34. Net Contributions (other than loans) (subtract Line 33 from Line 32).....	8417.75	16950.00
35. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))..... ▶	0.00	0.00
36. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
37. Net Operating Expenditures (subtract Line 36 from Line 35)..... ▶	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: (check only one)		PAGE 5 / 18	
	<input checked="" type="checkbox"/> 11a 13	<input type="checkbox"/> 11b 14	<input type="checkbox"/> 11c 15	<input type="checkbox"/> 12 16

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of Kansas Employee PAC FKA Carepac of Kansas

A. Full Name (Last, First, Middle Initial)
Danel Brake

Date of Receipt
N M / D E / Y Y Y Y
12 / 28 / 2001

Mailing Address
6D17 SW 38th

City State Zip Code
Topeka KS 66610

Amount of Each Receipt this Period
143.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation
BCBSKS Manager, Systems & Programming

Receipt For: Aggregate Year-to-Date ▼
Primary General
Other (specify) ▼ 288.00

Transaction ID: SA11A1.4168

B. Full Name (Last, First, Middle Initial)
Avin Calahan

Date of Receipt
N M / D E / Y Y Y Y
12 / 28 / 2001

Mailing Address
4422 Cally Creek Drive

City State Zip Code
Topeka KS 66614

Amount of Each Receipt this Period
189.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation
BCBSKS Manager, Corporate EOP Audit

Receipt For: Aggregate Year-to-Date ▼
Primary General
Other (specify) ▼ 338.00

Transaction ID: SA11A1.4120

C. Full Name (Last, First, Middle Initial)
Curtis Clark

Date of Receipt
N M / D E / Y Y Y Y
12 / 28 / 2001

Mailing Address
5124 SW 33rd Terr

City State Zip Code
Topeka KS 66614

Amount of Each Receipt this Period
195.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation
BCBSKS IRM Senior Technician

Receipt For: Aggregate Year-to-Date ▼
Primary General
Other (specify) ▼ 390.00

Transaction ID: SA11A1.4174

SUBTOTAL of Receipts This Page (optional) ▶ **507.00**

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: (check only one)		PAGE 6 / 18	
	<input checked="" type="checkbox"/> 11a 13	<input type="checkbox"/> 11b 14	<input type="checkbox"/> 11c 15	<input type="checkbox"/> 12 16

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of Kansas Employee PAC FKA Carepac of Kansas

Full Name (Last, First, Middle Initial)
A. Mary Cochran

Date of Receipt
M M / D D / Y Y Y Y
12 / 28 / 2001

Mailing Address
257 N Broadway

City State Zip Code
Wichita KS 67202

Amount of Each Receipt this Period
195.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation
BCBSKS Group Consultant

Receipt For: Aggregate Year-to-Date ▼
Primary General
Other (specify) ▼ 390.00

Transaction ID: SA11A1.4151

Full Name (Last, First, Middle Initial)
B. Sherian Cornell Balz

Date of Receipt
M M / D D / Y Y Y Y
12 / 28 / 2001

Mailing Address
2731 McAlister

City State Zip Code
Topeka KS 66614

Amount of Each Receipt this Period
104.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation
BCBSKS Senior Specialty Provider

Receipt For: Aggregate Year-to-Date ▼
Primary General
Other (specify) ▼ 208.00

Transaction ID: SA11A1.4154

Full Name (Last, First, Middle Initial)
C. Donald Daniels

Date of Receipt
M M / D D / Y Y Y Y
12 / 28 / 2001

Mailing Address
7209 SW Palace Dr

City State Zip Code
Topeka KS 66610

Amount of Each Receipt this Period
190.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation
BCBSKS Project Leader

Receipt For: Aggregate Year-to-Date ▼
Primary General
Other (specify) ▼ 260.00

Transaction ID: SA11A1.4162

SUBTOTAL of Receipts This Page (optional) ▶ **429.00**

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: (check only one)		PAGE 7 / 18	
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of Kansas Employee PAC FKA Carepac of Kansas

A. Full Name (Last, First, Middle Initial)
Roni Davis-Watson

Date of Receipt
M M / D D / Y Y Y Y
1 2 / 2 8 / 2 0 0 1

Mailing Address
3121 SW Belle Ave

City State Zip Code
Topeka KS 66614

Amount of Each Receipt this Period
130.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation
BCBSKS Manager, Primary Services

Receipt For: Aggregate Year-to-Date ▼
Primary General
Other (specify) ▼ 260.00

Transaction ID: SA11A1.4126

B. Full Name (Last, First, Middle Initial)
Rusty Doty

Date of Receipt
M M / D D / Y Y Y Y
1 2 / 2 8 / 2 0 0 1

Mailing Address
4811 SE paulen Rd

City State Zip Code
Berryton KS 66409

Amount of Each Receipt this Period
117.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation
BCBSKS Manager, Medicaid Provider Relations

Receipt For: Aggregate Year-to-Date ▼
Primary General
Other (specify) ▼ 234.00

Transaction ID: SA11A1.4141

C. Full Name (Last, First, Middle Initial)
John Knack Jr

Date of Receipt
M M / D D / Y Y Y Y
1 2 / 2 8 / 2 0 0 1

Mailing Address
7208 SW Falcon

City State Zip Code
Topeka KS 66610

Amount of Each Receipt this Period
260.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation
BCBSKS President & CEO

Receipt For: Aggregate Year-to-Date ▼
Primary General
Other (specify) ▼ 520.00

Transaction ID: SA11A1.4114

SUBTOTAL of Receipts This Page (optional) ▶ **507.00**

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: (check only one)		PAGE 8 / 18	
	<input checked="" type="checkbox"/> 11a 13	<input type="checkbox"/> 11b 14	<input type="checkbox"/> 11c 15	<input type="checkbox"/> 12 16

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of Kansas Employee PAC FKA Carepac of Kansas

Full Name (Last, First, Middle Initial)
A. Donald Lynn

Mailing Address
6838 Lake Ridge Parkway
City: Ozawie State: KS Zip Code: 66070

Date of Receipt
N M / D E / Y Y Y Y
12 / 28 / 2001

Amount of Each Receipt this Period
221.00

FEC ID number of contributing federal political committee.

Name of Employer: BCBSKS Occupation: Vice President Finance
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 442.00

Transaction ID: SA11A1.4177

Full Name (Last, First, Middle Initial)
B. David Marley

Mailing Address
3428 SW Stonybrook Dr
City: Topeka State: KS Zip Code: 66614

Date of Receipt
N M / D E / Y Y Y Y
12 / 28 / 2001

Amount of Each Receipt this Period
195.00

FEC ID number of contributing federal political committee.

Name of Employer: BCBSKS Occupation: VP, Subscriber Services & Gov Programs
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 390.00

Transaction ID: SA11A1.4123

Full Name (Last, First, Middle Initial)
C. Rose Morrow

Mailing Address
3920 SW 39th Terr
City: Topeka State: KS Zip Code: 66610

Date of Receipt
N M / D E / Y Y Y Y
12 / 28 / 2001

Amount of Each Receipt this Period
130.00

FEC ID number of contributing federal political committee.

Name of Employer: BCBSKS Occupation: Manager, Special Group Claim
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 260.00

Transaction ID: SA11A1.4129

SUBTOTAL of Receipts This Page (optional) ▶ **546.00**

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: (check only one)		PAGE 9 / 18	
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of Kansas Employee PAC FKA Carepac of Kansas

Full Name (Last, First, Middle Initial)
A. John Murel

Mailing Address
4325 SW Eagle Point Rd

City State Zip Code
Topeka KS 66610

Date of Receipt
N M / D E / Y Y Y Y
12 / 28 / 2001

Amount of Each Receipt this Period
117.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation
BCBSKS AIC President & COO

Receipt For: Aggregate Year-to-Date ▼
Primary General
Other (specify) ▼ 234.00

Transaction ID: SA11A1.4117

Full Name (Last, First, Middle Initial)
B. Fredrick Palenske

Mailing Address
6225 Vorse Rd

City State Zip Code
Auburn KS 66402

Date of Receipt
N M / D E / Y Y Y Y
12 / 28 / 2001

Amount of Each Receipt this Period
130.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation
BCBSKS Director, Legislative & Regulatory

Receipt For: Aggregate Year-to-Date ▼
Primary General
Other (specify) ▼ 260.00

Transaction ID: SA11A1.4109

Full Name (Last, First, Middle Initial)
C. John Reedy

Mailing Address
5722 West 27th

City State Zip Code
Topeka KS 66614

Date of Receipt
N M / D E / Y Y Y Y
12 / 28 / 2001

Amount of Each Receipt this Period
130.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation
BCBSKS Assistant Manager, S&P

Receipt For: Aggregate Year-to-Date ▼
Primary General
Other (specify) ▼ 260.00

Transaction ID: SA11A1.4157

SUBTOTAL of Receipts This Page (optional) ▶ **377.00**

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: (check only one)		PAGE 10 / 18	
	<input checked="" type="checkbox"/> 11a 13	<input type="checkbox"/> 11b 14	<input type="checkbox"/> 11c 15	<input type="checkbox"/> 12 16

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of Kansas Employee PAC FKA Carepac of Kansas

A. Steven Rain Date of Receipt

Mailing Address N M / D E / Y Y Y
3805 NW Eric Dr 12 / 28 / 2001

City State Zip Code
Topeka KS 66618 Amount of Each Receipt this Period

FEC ID number of contributing federal political committee. 117.00

Name of Employer BCBSKS	Occupation Senior Systems Analyst
----------------------------	--------------------------------------

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 234.00

Transaction ID: SA11A1.4165

B. Richard Schroeder Date of Receipt

Mailing Address N M / D E / Y Y Y
1501 SW Bella Ave 12 / 28 / 2001

City State Zip Code
Topeka KS 66604 Amount of Each Receipt this Period

FEC ID number of contributing federal political committee. 143.00

Name of Employer BCBSKS	Occupation IS Standards & Business Resumption
----------------------------	--------------------------------------------------

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 266.00

Transaction ID: SA11A1.4171

C. Ronald Simmons Date of Receipt

Mailing Address N M / D E / Y Y Y
108 Marilyn Dr 12 / 28 / 2001

City State Zip Code
Holton KS 66436 Amount of Each Receipt this Period

FEC ID number of contributing federal political committee. 169.00

Name of Employer BCBSKS	Occupation Manager, Cost Accounting
----------------------------	----------------------------------------

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 338.00

Transaction ID: SA11A1.4180

SUBTOTAL of Receipts This Page (optional)	429.00
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: (check only one)		PAGE 11 / 18	
	<input checked="" type="checkbox"/> 11a 13	<input type="checkbox"/> 11b 14	<input type="checkbox"/> 11c 15	<input type="checkbox"/> 12 16

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of Kansas Employee PAC FKA Carepac of Kansas

A. Full Name (Last, First, Middle Initial)
Carol Stevin

Date of Receipt
N M / D E / Y Y Y Y
12 / 28 / 2001

Mailing Address
4822 West Hills Dr

City State Zip Code
Topeka KS 66606

Amount of Each Receipt this Period
130.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation
BCBSKS Director, Medicare/Medicaid

Receipt For: Aggregate Year-to-Date ▼
Primary General
Other (specify) ▼ 260.00

Transaction ID: SA11A1.4135

B. Full Name (Last, First, Middle Initial)
Barry Trubon

Date of Receipt
N M / D E / Y Y Y Y
12 / 28 / 2001

Mailing Address
315-I Houston St

City State Zip Code
Manhattan KS 66502

Amount of Each Receipt this Period
130.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation
BCBSKS Group Consultant

Receipt For: Aggregate Year-to-Date ▼
Primary General
Other (specify) ▼ 260.00

Transaction ID: SA11A1.4148

C. Full Name (Last, First, Middle Initial)
Linda Vanderkamp

Date of Receipt
N M / D E / Y Y Y Y
12 / 28 / 2001

Mailing Address
6900 SE 61st St

City State Zip Code
Tecumseh KS 66542

Amount of Each Receipt this Period
195.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation
BCBSKS VP, Government Programs

Receipt For: Aggregate Year-to-Date ▼
Primary General
Other (specify) ▼ 390.00

Transaction ID: SA11A1.4132

SUBTOTAL of Receipts This Page (optional) ▶ **455.00**

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: (check only one)		PAGE 12 / 18	
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
				<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of Kansas Employee PAC FKA Carepac of Kansas

Full Name (Last, First, Middle Initial)
A. Leslie Watson

Mailing Address
3121 SW Belle

City State Zip Code
Topeka KS 66614

Date of Receipt
N M / D E / Y Y Y Y
12 / 28 / 2001

FEC ID number of contributing federal political committee.

Name of Employer Occupation
BCBSKS Director, Payment Safeguard

Receipt For: Aggregate Year-to-Date ▼
Primary General Other (specify) ▼ 468.00

Amount of Each Receipt this Period 234.00

Transaction ID: SA11A1.4138

Full Name (Last, First, Middle Initial)
B. Ralph Weber, II

Mailing Address
8526 SE Ratner Road

City State Zip Code
Berryton KS 66409

Date of Receipt
N M / D E / Y Y Y Y
12 / 28 / 2001

FEC ID number of contributing federal political committee.

Name of Employer Occupation
BCBSKS Vice President, Medical Affairs

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

Amount of Each Receipt this Period 325.00

Transaction ID: SA11A1.4183

C.

SUBTOTAL of Receipts This Page (optional)	▶	559.00
TOTAL This Period (last page this line number only)	▶	3809.00

**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)

PAGE 13 / 18

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

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NAME OF COMMITTEE (In Full)

Blue Cross and Blue Shield of Kansas Employee PAC FKA Carepac of Kansas

Full Name (Last, First, Middle Initial)

A. BluePac Blue Cross and Blue Shield Association

Mailing Address

1310 G Street NW

12th Floor

City

Washington

State

DC

Zip Code

20005

Purpose of Disbursement

Date of Disbursement

12 / 26 / 2001

Amount of Each Disbursement this Period

3810.00

Candidate Name

Category/
Type

Office Sought:

House

Senate

President

State:

District:

Disbursement For:

Primary

General

Other (specify) ▼

Transaction ID: 5B22.418B

B.

C.

SUBTOTAL of Disbursements This Page (optional) ▶

3810.00

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

3810.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Blue Cross and Blue Shield of Kansas Employee PAC FKA Carepac of Kansas

Full Name (Last, First, Middle Initial) A. Barnett for Senate		Date of Disbursement 09 / 26 / 2001
Mailing Address 1400 Lincoln City Emporia State KS Zip Code 66801		Amount of Each Disbursement this Period 250.00
Purpose of Disbursement		Transaction ID: SB29.4192
Candidate Name		
Office Sought: House Senate President	Disbursement For: Primary General Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Feleciano for Senate		Date of Disbursement 12 / 11 / 2001
Mailing Address 815 Barbara St City Wichita State KS Zip Code 67217		Amount of Each Disbursement this Period 250.00
Purpose of Disbursement		Transaction ID: SB29.4210
Candidate Name		
Office Sought: House Senate President	Disbursement For: Primary General Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Glasscock for Governor		Date of Disbursement 09 / 06 / 2001
Mailing Address PO Box 37 City Manhattan State KS Zip Code 66505		Amount of Each Disbursement this Period 500.00
Purpose of Disbursement		Transaction ID: SB29.4190
Candidate Name		
Office Sought: House Senate President	Disbursement For: Primary General Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional)	1000.00
TOTAL This Period (last page this line number only)	

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

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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of Kansas Employee PAC FKA Carepac of Kansas

Full Name (Last, First, Middle Initial) A. Gordon for Representative		Date of Disbursement 12 / 11 / 2001
Mailing Address 5820 SW 27th St City: Topeka State: KS Zip Code: 66614		Amount of Each Disbursement this Period 250.00
Purpose of Disbursement		Transaction ID: SB29.4208
Candidate Name		Category/ Type
Office Sought: House Senate President	Disbursement For: Primary General Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Jenkins for State Treasurer		Date of Disbursement 12 / 10 / 2001
Mailing Address 5840 SW Clarion Ln City: Topeka State: KS Zip Code: 66610		Amount of Each Disbursement this Period 250.00
Purpose of Disbursement		Transaction ID: SB29.4206
Candidate Name		Category/ Type
Office Sought: House Senate President	Disbursement For: Primary General Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Kansans for Democratic House		Date of Disbursement 12 / 26 / 2001
Mailing Address PO Box 2083 City: Topeka State: KS Zip Code: 66601		Amount of Each Disbursement this Period 500.00
Purpose of Disbursement		Transaction ID: SB29.4212
Candidate Name		Category/ Type
Office Sought: House Senate President	Disbursement For: Primary General Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional)	1000.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Blue Cross and Blue Shield of Kansas Employee PAC FKA Carepac of Kansas

Full Name (Last, First, Middle Initial) A. Kansas Republican Senatorial Committee		Date of Disbursement 11 / 01 / 2001	
Mailing Address PO Box 2663 City Topeka		State KS	Zip Code 66601
Purpose of Disbursement		Amount of Each Disbursement this Period 250.00	
Candidate Name		Category/ Type	
Office Sought:	House Senate President	Disbursement For: Primary General Other (specify) ▼	
State:	District:	Transaction ID: SB29.4196	

Full Name (Last, First, Middle Initial) B. Kerr for Senate		Date of Disbursement 11 / 20 / 2001	
Mailing Address PO Box 2620 City Hutchinson		State KS	Zip Code 67504
Purpose of Disbursement		Amount of Each Disbursement this Period 500.00	
Candidate Name		Category/ Type	
Office Sought:	House Senate President	Disbursement For: Primary General Other (specify) ▼	
State:	District:	Transaction ID: SB29.4198	

Full Name (Last, First, Middle Initial) C. Nichols for Representative		Date of Disbursement 12 / 06 / 2001	
Mailing Address 2329 SE Virginia City Topeka		State KS	Zip Code 66605
Purpose of Disbursement		Amount of Each Disbursement this Period 250.00	
Candidate Name		Category/ Type	
Office Sought:	House Senate President	Disbursement For: Primary General Other (specify) ▼	
State:	District:	Transaction ID: SB29.4202	

SUBTOTAL of Disbursements This Page (optional) ▶	1000.00
TOTAL This Period (last page this line number only) ▶	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of Kansas Employee PAC FKA Carepac of Kansas

Full Name (Last, First, Middle Initial) A. Oleen for Senator		Date of Disbursement 12 / 10 / 2001
Mailing Address 3000 Stagg Hill Rd City: Manhattan State: KS Zip Code: 66502		Amount of Each Disbursement this Period 250.00
Purpose of Disbursement	Candidate Name	Transaction ID: SB29.4204
Office Sought: House Senate President	Disbursement For: Primary General Other (specify) ▼	
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Shallenberger for Governor		Date of Disbursement 12 / 26 / 2001
Mailing Address PO Box 57 City: Topeka State: KS Zip Code: 66601		Amount of Each Disbursement this Period 500.00
Purpose of Disbursement	Candidate Name	Transaction ID: SB29.4214
Office Sought: House Senate President	Disbursement For: Primary General Other (specify) ▼	
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C. Stovall for Governor		Date of Disbursement 11 / 20 / 2001
Mailing Address PO Box 1303 City: Manhattan State: KS Zip Code: 66505		Amount of Each Disbursement this Period 500.00
Purpose of Disbursement	Candidate Name	Transaction ID: SB29.4200
Office Sought: House Senate President	Disbursement For: Primary General Other (specify) ▼	
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional)	1250.00
TOTAL This Period (last page this line number only)	

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

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FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Blue Cross and Blue Shield of Kansas Employee PAC FKA Carepac of Kansas

Full Name (Last, First, Middle Initial) A. Tafanelli for Representative		Date of Disbursement 09 / 26 / 2001	
Mailing Address 7075 122nd St City Ozawkie		State KS	Zip Code 66070
Purpose of Disbursement		Amount of Each Disbursement this Period 100.00	
Candidate Name		Category/ Type	
Office Sought:	House Senate President	Disbursement For: Primary General Other (specify) ▼	
State:	District:	Transaction ID: 5B29.4194	

B.

C.

SUBTOTAL of Disbursements This Page (optional)	▶	100.00
TOTAL This Period (last page this line number only)	▶	4350.00