

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 North Carolina Employee Political Action Committee

ADDRESS (number and street) P.O. Box 2291
 Check if different than previously reported. (ACC)
Durham NC 27702

2. **FEC IDENTIFICATION NUMBER** C00312223
3. IS THIS REPORT NEW (N) **OR** AMENDED (A)

4. **TYPE OF REPORT** (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report(Q1)
 July 15 Quarterly Report(Q2)
 October 15 Quarterly Report(Q3)
 January 31 Quarterly Report(YE)
 July 31 Mid-Year Report(Non-election Year Only) (MY)
 Termination Report (TER)
(b) Monthly Report Due On:
 Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)
(c) 12-Day **PRE-Election** Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (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 2008 through 09 30 2008

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 Kenneth Wright

Signature of Treasurer Electronically Filed by Kenneth Wright Date 10 08 2008

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

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

Report Covering the Period: From:

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To:

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	0	8

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	Y	Y	Y	Y	2	0	0	8		70275.08
Y	Y	Y	Y							
2	0	0	8							
(b) Cash on Hand at Beginning of Reporting Period	58831.14									
(c) Total Receipts (from Line 19)	34987.76	97863.82								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	93818.90	168138.90								
7. Total Disbursements (from Line 31)	87926.00	162246.00								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	5892.90	5892.90								
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**

Write or Type Committee Name

Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

Report Covering the Period: From:

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To:

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	0	8

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	31712.13	76305.85
(i) Itemized (use Schedule A)	3275.63	21557.97
(ii) Unitemized	34987.76	97863.82
(iii) TOTAL (add Lines 11(a)(i) and (ii)	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 Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	34987.76	97863.82
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))	34987.76	97863.82
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	34987.76	97863.82

DETAILED SUMMARY PAGE

of Disbursements

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	20.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	0.00	20.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	17000.00	27500.00
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	226.00	226.00
(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))	226.00	226.00
29. Other Disbursements.....	70700.00	134500.00
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))..	87926.00	162246.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	87926.00	162246.00

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)	34987.76	97863.82
34. Total Contribution Refunds (from Line 28(d))	226.00	226.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	34761.76	97637.82
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	20.00
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	20.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 200
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) H Jorgenia Abernathy	Date of Receipt MM / DD / YYYY 07 / 03 / 2008
	Mailing Address 108 Hoteling Ct	Transaction ID: SA11AI.68839
	City State Zip Code Chapel Hill NC 27514	Amount of Each Receipt this Period 40.00
	FEC ID number of contributing federal political committee. C	
Name of Employer BCBSNC	Occupation VP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 560.00	

B.	Full Name (Last, First, Middle Initial) H Jorgenia Abernathy	Date of Receipt MM / DD / YYYY 07 / 18 / 2008
	Mailing Address 108 Hoteling Ct	Transaction ID: SA11AI.69007
	City State Zip Code Chapel Hill NC 27514	Amount of Each Receipt this Period 40.00
	FEC ID number of contributing federal political committee. C	
Name of Employer BCBSNC	Occupation VP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

C.	Full Name (Last, First, Middle Initial) H Jorgenia Abernathy	Date of Receipt MM / DD / YYYY 08 / 01 / 2008
	Mailing Address 108 Hoteling Ct	Transaction ID: SA11AI.69240
	City State Zip Code Chapel Hill NC 27514	Amount of Each Receipt this Period 40.00
	FEC ID number of contributing federal political committee. C	
Name of Employer BCBSNC	Occupation VP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 640.00	

SUBTOTAL of Receipts This Page (optional)	120.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 200
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) H Jorgenia Abernathy		Date of Receipt	
	Mailing Address 108 Hoteling Ct		M M / D D / Y Y Y Y Y 0 8 / 1 5 / 2 0 0 8	
	City	State	Zip Code	Transaction ID: SA11AI.69421
	Chapel Hill	NC	27514	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		40.00	
Name of Employer BCBSNC		Occupation VP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		680.00		

B.	Full Name (Last, First, Middle Initial) H Jorgenia Abernathy		Date of Receipt	
	Mailing Address 108 Hoteling Ct		M M / D D / Y Y Y Y Y 0 8 / 2 9 / 2 0 0 8	
	City	State	Zip Code	Transaction ID: SA11AI.69594
	Chapel Hill	NC	27514	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		40.00	
Name of Employer BCBSNC		Occupation VP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		720.00		

C.	Full Name (Last, First, Middle Initial) H Jorgenia Abernathy		Date of Receipt	
	Mailing Address 108 Hoteling Ct		M M / D D / Y Y Y Y Y 0 9 / 1 2 / 2 0 0 8	
	City	State	Zip Code	Transaction ID: SA11AI.69770
	Chapel Hill	NC	27514	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		40.00	
Name of Employer BCBSNC		Occupation VP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		760.00		

SUBTOTAL of Receipts This Page (optional)	▶	120.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 200
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) H Jorgenia Abernathy		Date of Receipt	
	Mailing Address 108 Hoteling Ct		M M / D D / Y Y Y Y Y 09 / 26 / 2008	
	City	State	Zip Code	Transaction ID: SA11AI.69946
	Chapel Hill	NC	27514	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		40.00	
Name of Employer BCBSNC		Occupation VP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 800.00		

B.	Full Name (Last, First, Middle Initial) Bradley Adcock		Date of Receipt	
	Mailing Address 106 Lindenthal Court		M M / D D / Y Y Y Y Y 07 / 03 / 2008	
	City	State	Zip Code	Transaction ID: SA11AI.68842
	Cary	NC	27513	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		103.25	
Name of Employer BCBSNC		Occupation Vice President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1428.05		

C.	Full Name (Last, First, Middle Initial) Bradley Adcock		Date of Receipt	
	Mailing Address 106 Lindenthal Court		M M / D D / Y Y Y Y Y 07 / 18 / 2008	
	City	State	Zip Code	Transaction ID: SA11AI.69010
	Cary	NC	27513	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		103.25	
Name of Employer BCBSNC		Occupation Vice President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1531.30		

SUBTOTAL of Receipts This Page (optional)	▶	246.50
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 200
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Bradley Adcock	Date of Receipt MM / DD / YYYY 08 / 01 / 2008
	Mailing Address 106 Lindenthal Court	Transaction ID: SA11AI.69243
	City Cary State NC Zip Code 27513	Amount of Each Receipt this Period 103.25
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation Vice President Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1634.55	

B.	Full Name (Last, First, Middle Initial) Bradley Adcock	Date of Receipt MM / DD / YYYY 08 / 15 / 2008
	Mailing Address 106 Lindenthal Court	Transaction ID: SA11AI.69424
	City Cary State NC Zip Code 27513	Amount of Each Receipt this Period 103.25
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation Vice President Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1737.80	

C.	Full Name (Last, First, Middle Initial) Bradley Adcock	Date of Receipt MM / DD / YYYY 08 / 29 / 2008
	Mailing Address 106 Lindenthal Court	Transaction ID: SA11AI.69597
	City Cary State NC Zip Code 27513	Amount of Each Receipt this Period 103.25
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation Vice President Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1841.05	

SUBTOTAL of Receipts This Page (optional)	309.75
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 200
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Bradley Adcock	Date of Receipt MM / DD / YYYY 09 / 12 / 2008
	Mailing Address 106 Lindenthal Court	Transaction ID: SA11AI.69773
	City State Zip Code Cary NC 27513	Amount of Each Receipt this Period 103.25
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation Vice President Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1944.30

B.	Full Name (Last, First, Middle Initial) Bradley Adcock	Date of Receipt MM / DD / YYYY 09 / 26 / 2008
	Mailing Address 106 Lindenthal Court	Transaction ID: SA11AI.69949
	City State Zip Code Cary NC 27513	Amount of Each Receipt this Period 103.25
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation Vice President Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2047.55

C.	Full Name (Last, First, Middle Initial) William Alberti	Date of Receipt MM / DD / YYYY 07 / 03 / 2008
	Mailing Address 5347 Yardley Terrace	Transaction ID: SA11AI.68843
	City State Zip Code Durham NC 27707	Amount of Each Receipt this Period 25.61
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation Assoc. General Counsel Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 352.44

SUBTOTAL of Receipts This Page (optional)	▶	232.11
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 / 200
	<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 North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) William Alberti	Date of Receipt MM / DD / YYYY 07 / 18 / 2008
	Mailing Address 5347 Yardley Terrace	Transaction ID: SA11AI.69011
	City State Zip Code Durham NC 27707	Amount of Each Receipt this Period 25.61
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation Assoc. General Counsel Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 378.05	

B.	Full Name (Last, First, Middle Initial) William Alberti	Date of Receipt MM / DD / YYYY 08 / 01 / 2008
	Mailing Address 5347 Yardley Terrace	Transaction ID: SA11AI.69244
	City State Zip Code Durham NC 27707	Amount of Each Receipt this Period 25.61
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation Assoc. General Counsel Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 403.66	

C.	Full Name (Last, First, Middle Initial) William Alberti	Date of Receipt MM / DD / YYYY 08 / 15 / 2008
	Mailing Address 5347 Yardley Terrace	Transaction ID: SA11AI.69425
	City State Zip Code Durham NC 27707	Amount of Each Receipt this Period 25.61
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation Assoc. General Counsel Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 429.27	

SUBTOTAL of Receipts This Page (optional)	76.83
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 / 200
	<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 North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) William Alberti		Date of Receipt
	Mailing Address 5347 Yardley Terrace		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	Durham	NC	27707
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.69598
Name of Employer BCBSNC		Occupation Assoc. General Counsel	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 454.88	<input type="text"/> 25.61

B.	Full Name (Last, First, Middle Initial) William Alberti		Date of Receipt
	Mailing Address 5347 Yardley Terrace		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	Durham	NC	27707
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.69774
Name of Employer BCBSNC		Occupation Assoc. General Counsel	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 480.49	<input type="text"/> 25.61

C.	Full Name (Last, First, Middle Initial) William Alberti		Date of Receipt
	Mailing Address 5347 Yardley Terrace		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	Durham	NC	27707
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.69950
Name of Employer BCBSNC		Occupation Assoc. General Counsel	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 506.10	<input type="text"/> 25.61

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 76.83
TOTAL This Period (last page this line number only)	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 / 200
	<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 North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Daniel Atherton		Date of Receipt
	Mailing Address 8800 Hatton Court		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 07 / 03 / 2008
	City	State	Zip Code
	Charlotte	NC	28277
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.68846
Name of Employer BCBSNC		Occupation Regional Sales Director	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 350.00	<input type="text"/> 25.00

B.	Full Name (Last, First, Middle Initial) Daniel Atherton		Date of Receipt
	Mailing Address 8800 Hatton Court		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 07 / 18 / 2008
	City	State	Zip Code
	Charlotte	NC	28277
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.69014
Name of Employer BCBSNC		Occupation Regional Sales Director	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 375.00	<input type="text"/> 25.00

C.	Full Name (Last, First, Middle Initial) Daniel Atherton		Date of Receipt
	Mailing Address 8800 Hatton Court		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 08 / 01 / 2008
	City	State	Zip Code
	Charlotte	NC	28277
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.69247
Name of Employer BCBSNC		Occupation Regional Sales Director	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 400.00	<input type="text"/> 25.00

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 75.00
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 / 200
	<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 North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Daniel Atherton		Date of Receipt
	Mailing Address 8800 Hatton Court		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 8 / 1 5 / 2 0 0 8
	City	State	Zip Code
	Charlotte	NC	28277
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.69428
Name of Employer BCBSNC		Occupation Regional Sales Director	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 425.00	<input type="text"/> 25.00

B.	Full Name (Last, First, Middle Initial) Daniel Atherton		Date of Receipt
	Mailing Address 8800 Hatton Court		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 8 / 2 9 / 2 0 0 8
	City	State	Zip Code
	Charlotte	NC	28277
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.69601
Name of Employer BCBSNC		Occupation Regional Sales Director	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 450.00	<input type="text"/> 25.00

C.	Full Name (Last, First, Middle Initial) Daniel Atherton		Date of Receipt
	Mailing Address 8800 Hatton Court		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 9 / 1 2 / 2 0 0 8
	City	State	Zip Code
	Charlotte	NC	28277
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.69777
Name of Employer BCBSNC		Occupation Regional Sales Director	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 475.00	<input type="text"/> 25.00

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 75.00
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 15 / 200

(check only one)

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

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NAME OF COMMITTEE (In Full)

Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Daniel Atherton

Mailing Address 8800 Hatton Court

City State Zip Code
Charlotte NC 28277

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

Name of Employer Occupation
BCBSNC Regional Sales Director

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 6 / 2 0 0 8

Transaction ID: SA11AI.69953

Amount of Each Receipt this Period
25.00

B.

Full Name (Last, First, Middle Initial)

J. Joseph Bauers

Mailing Address 203 Woodleaf Dr.

City State Zip Code
Chapel Hill NC 27516

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

Name of Employer Occupation
BCBSNC Director

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 210.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 0 3 / 2 0 0 8

Transaction ID: SA11AI.68850

Amount of Each Receipt this Period
15.00

C.

Full Name (Last, First, Middle Initial)

J. Joseph Bauers

Mailing Address 203 Woodleaf Dr.

City State Zip Code
Chapel Hill NC 27516

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

Name of Employer Occupation
BCBSNC Director

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 225.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 1 8 / 2 0 0 8

Transaction ID: SA11AI.69020

Amount of Each Receipt this Period
15.00

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: (check only one)	PAGE 16 / 200
	<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 North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) J. Joseph Bauers		Date of Receipt	
	Mailing Address 203 Woodleaf Dr.		M M / D D / Y Y Y Y Y 08 / 01 / 2008	
	City	State	Zip Code	Transaction ID: SA11AI.69252
	Chapel Hill	NC	27516	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		15.00	
Name of Employer BCBSNC		Occupation Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		240.00		

B.	Full Name (Last, First, Middle Initial) J. Joseph Bauers		Date of Receipt	
	Mailing Address 203 Woodleaf Dr.		M M / D D / Y Y Y Y Y 08 / 15 / 2008	
	City	State	Zip Code	Transaction ID: SA11AI.69433
	Chapel Hill	NC	27516	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		15.00	
Name of Employer BCBSNC		Occupation Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		255.00		

C.	Full Name (Last, First, Middle Initial) J. Joseph Bauers		Date of Receipt	
	Mailing Address 203 Woodleaf Dr.		M M / D D / Y Y Y Y Y 08 / 29 / 2008	
	City	State	Zip Code	Transaction ID: SA11AI.69606
	Chapel Hill	NC	27516	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		15.00	
Name of Employer BCBSNC		Occupation Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		270.00		

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 17 / 200

(check only one)

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

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NAME OF COMMITTEE (In Full)

Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

J. Joseph Bauers

Mailing Address 203 Woodleaf Dr.

City State Zip Code
Chapel Hill NC 27516

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

Name of Employer Occupation
BCBSNC Director

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 285.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 2 / 2 0 0 8

Transaction ID: SA11AI.69782

Amount of Each Receipt this Period

15.00

B.

Full Name (Last, First, Middle Initial)

J. Joseph Bauers

Mailing Address 203 Woodleaf Dr.

City State Zip Code
Chapel Hill NC 27516

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

Name of Employer Occupation
BCBSNC Director

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 6 / 2 0 0 8

Transaction ID: SA11AI.69958

Amount of Each Receipt this Period

15.00

C.

Full Name (Last, First, Middle Initial)

Gary Bolt

Mailing Address 4801 Highgate Drive

City State Zip Code
Durham NC 27713

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

Name of Employer Occupation
BCBSNC VP

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 799.35

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 0 3 / 2 0 0 8

Transaction ID: SA11AI.68853

Amount of Each Receipt this Period

59.00

SUBTOTAL of Receipts This Page (optional) ▶

89.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 / 200
	<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 North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Gary Bolt		Date of Receipt
	Mailing Address 4801 Highgate Drive		<input type="text" value="07"/> / <input type="text" value="18"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Durham	NC	27713
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer BCBSNC		Occupation VP	Transaction ID: SA11AI.69023
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="858.35"/>	<input type="text" value="59.00"/>

B.	Full Name (Last, First, Middle Initial) Gary Bolt		Date of Receipt
	Mailing Address 4801 Highgate Drive		<input type="text" value="08"/> / <input type="text" value="01"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Durham	NC	27713
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer BCBSNC		Occupation VP	Transaction ID: SA11AI.69255
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="917.35"/>	<input type="text" value="59.00"/>

C.	Full Name (Last, First, Middle Initial) Gary Bolt		Date of Receipt
	Mailing Address 4801 Highgate Drive		<input type="text" value="08"/> / <input type="text" value="15"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Durham	NC	27713
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer BCBSNC		Occupation VP	Transaction ID: SA11AI.69436
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="976.35"/>	<input type="text" value="59.00"/>

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="177.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 19 / 200
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial) Gary Bolt		Date of Receipt
Mailing Address 4801 Highgate Drive		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 8 / 2 9 / 2 0 0 8
City	State	Zip Code
Durham	NC	27713
FEC ID number of contributing federal political committee.		Transaction ID: SA11AI.69609
C <input type="text"/>		Amount of Each Receipt this Period
		<input type="text"/> 59.00
Name of Employer BCBSNC	Occupation VP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text"/> 1035.35	

B.

Full Name (Last, First, Middle Initial) Gary Bolt		Date of Receipt
Mailing Address 4801 Highgate Drive		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 9 / 1 2 / 2 0 0 8
City	State	Zip Code
Durham	NC	27713
FEC ID number of contributing federal political committee.		Transaction ID: SA11AI.69785
C <input type="text"/>		Amount of Each Receipt this Period
		<input type="text"/> 59.00
Name of Employer BCBSNC	Occupation VP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text"/> 1094.35	

C.

Full Name (Last, First, Middle Initial) Gary Bolt		Date of Receipt
Mailing Address 4801 Highgate Drive		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 9 / 2 6 / 2 0 0 8
City	State	Zip Code
Durham	NC	27713
FEC ID number of contributing federal political committee.		Transaction ID: SA11AI.69961
C <input type="text"/>		Amount of Each Receipt this Period
		<input type="text"/> 59.00
Name of Employer BCBSNC	Occupation VP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text"/> 1153.35	

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 177.00
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 20 / 200
(check only one)

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

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial) H Lewis Borman		Date of Receipt MM / DD / YYYY 07 / 03 / 2008
Mailing Address 104 Ironwoods Drive		Transaction ID: SA11AI.68854
City Chapel Hill	State NC	Zip Code 27516
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 15.33
Name of Employer BCBSNC	Occupation Program Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 212.37	

B.

Full Name (Last, First, Middle Initial) H Lewis Borman		Date of Receipt MM / DD / YYYY 07 / 18 / 2008
Mailing Address 104 Ironwoods Drive		Transaction ID: SA11AI.69024
City Chapel Hill	State NC	Zip Code 27516
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 15.33
Name of Employer BCBSNC	Occupation Program Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 227.70	

C.

Full Name (Last, First, Middle Initial) H Lewis Borman		Date of Receipt MM / DD / YYYY 08 / 01 / 2008
Mailing Address 104 Ironwoods Drive		Transaction ID: SA11AI.69256
City Chapel Hill	State NC	Zip Code 27516
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 15.33
Name of Employer BCBSNC	Occupation Program Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 243.03	

SUBTOTAL of Receipts This Page (optional)	▶	45.99
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 / 200
	<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 North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) H Lewis Borman	Date of Receipt MM / DD / YYYY 08 / 15 / 2008
	Mailing Address 104 Ironwoods Drive	Transaction ID: SA11AI.69437
	City State Zip Code Chapel Hill NC 27516	Amount of Each Receipt this Period 15.33
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation Program Manager Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 258.36	

B.	Full Name (Last, First, Middle Initial) H Lewis Borman	Date of Receipt MM / DD / YYYY 08 / 29 / 2008
	Mailing Address 104 Ironwoods Drive	Transaction ID: SA11AI.69610
	City State Zip Code Chapel Hill NC 27516	Amount of Each Receipt this Period 15.33
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation Program Manager Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 273.69	

C.	Full Name (Last, First, Middle Initial) H Lewis Borman	Date of Receipt MM / DD / YYYY 09 / 12 / 2008
	Mailing Address 104 Ironwoods Drive	Transaction ID: SA11AI.69786
	City State Zip Code Chapel Hill NC 27516	Amount of Each Receipt this Period 15.33
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation Program Manager Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 289.02	

SUBTOTAL of Receipts This Page (optional)	▶	45.99
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 / 200
	<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 North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) H Lewis Borman	Date of Receipt MM / DD / YYYY 09 / 26 / 2008
	Mailing Address 104 Ironwoods Drive	Transaction ID: SA11AI.69962
	City State Zip Code Chapel Hill NC 27516	Amount of Each Receipt this Period 15.33
	FEC ID number of contributing federal political committee. C	
Name of Employer BCBSNC	Occupation Program Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 304.35	

B.	Full Name (Last, First, Middle Initial) W Don Bradley	Date of Receipt MM / DD / YYYY 07 / 03 / 2008
	Mailing Address 15 Altmont Ct	Transaction ID: SA11AI.68855
	City State Zip Code Durham NC 27705	Amount of Each Receipt this Period 125.00
	FEC ID number of contributing federal political committee. C	
Name of Employer BCBSNC	Occupation SVP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1750.00	

C.	Full Name (Last, First, Middle Initial) W Don Bradley	Date of Receipt MM / DD / YYYY 07 / 18 / 2008
	Mailing Address 15 Altmont Ct	Transaction ID: SA11AI.69025
	City State Zip Code Durham NC 27705	Amount of Each Receipt this Period 125.00
	FEC ID number of contributing federal political committee. C	
Name of Employer BCBSNC	Occupation SVP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1875.00	

SUBTOTAL of Receipts This Page (optional)	265.33
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 / 200
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) W Don Bradley		Date of Receipt	
	Mailing Address 15 Altmont Ct		M M / D D / Y Y Y Y Y 0 8 / 0 1 / 2 0 0 8	
	City	State	Zip Code	Transaction ID: SA11AI.69257
	Durham	NC	27705	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		125.00	
Name of Employer BCBSNC		Occupation SVP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		2000.00		

B.	Full Name (Last, First, Middle Initial) W Don Bradley		Date of Receipt	
	Mailing Address 15 Altmont Ct		M M / D D / Y Y Y Y Y 0 8 / 1 5 / 2 0 0 8	
	City	State	Zip Code	Transaction ID: SA11AI.69438
	Durham	NC	27705	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		125.00	
Name of Employer BCBSNC		Occupation SVP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		2125.00		

C.	Full Name (Last, First, Middle Initial) W Don Bradley		Date of Receipt	
	Mailing Address 15 Altmont Ct		M M / D D / Y Y Y Y Y 0 8 / 2 9 / 2 0 0 8	
	City	State	Zip Code	Transaction ID: SA11AI.69611
	Durham	NC	27705	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		125.00	
Name of Employer BCBSNC		Occupation SVP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		2250.00		

SUBTOTAL of Receipts This Page (optional)	375.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 / 200
	<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 North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) W Don Bradley		Date of Receipt	
	Mailing Address 15 Altmont Ct		M M / D D / Y Y Y Y Y 09 / 12 / 2008	
	City	State	Zip Code	Transaction ID: SA11AI.69787
	Durham	NC	27705	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		125.00	
Name of Employer BCBSNC		Occupation SVP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		2375.00		

B.	Full Name (Last, First, Middle Initial) W Don Bradley		Date of Receipt	
	Mailing Address 15 Altmont Ct		M M / D D / Y Y Y Y Y 09 / 26 / 2008	
	City	State	Zip Code	Transaction ID: SA11AI.69963
	Durham	NC	27705	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		125.00	
Name of Employer BCBSNC		Occupation SVP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		2500.00		

C.	Full Name (Last, First, Middle Initial) Cynthia Brenneman		Date of Receipt	
	Mailing Address 14 Steepleton Court		M M / D D / Y Y Y Y Y 07 / 03 / 2008	
	City	State	Zip Code	Transaction ID: SA11AI.68856
	Hillsborough	NC	27278	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		58.93	
Name of Employer BCBSNC		Occupation VP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		813.67		

SUBTOTAL of Receipts This Page (optional)	308.93
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 25 / 200
(check only one)

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

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. Full Name (Last, First, Middle Initial)
Cynthia Brenneman

Mailing Address 14 Steepleton Court

City Hillsborough State NC Zip Code 27278

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

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 872.60

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 18 / 2008

Transaction ID: SA11AI.69026

Amount of Each Receipt this Period
58.93

B. Full Name (Last, First, Middle Initial)
Cynthia Brenneman

Mailing Address 14 Steepleton Court

City Hillsborough State NC Zip Code 27278

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

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 931.53

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 01 / 2008

Transaction ID: SA11AI.69258

Amount of Each Receipt this Period
58.93

C. Full Name (Last, First, Middle Initial)
Cynthia Brenneman

Mailing Address 14 Steepleton Court

City Hillsborough State NC Zip Code 27278

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

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 990.46

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 15 / 2008

Transaction ID: SA11AI.69439

Amount of Each Receipt this Period
58.93

SUBTOTAL of Receipts This Page (optional) ► **176.79**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 26 / 200

(check only one)

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

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NAME OF COMMITTEE (In Full)

Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Cynthia Brenneman

Mailing Address 14 Steepleton Court

City Hillsborough State NC Zip Code 27278

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

Name of Employer BCBSNC Occupation VP

Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1049.39

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 2 9 / 2 0 0 8

Transaction ID: SA11AI.69612

Amount of Each Receipt this Period

58.93

B.

Full Name (Last, First, Middle Initial)

Cynthia Brenneman

Mailing Address 14 Steepleton Court

City Hillsborough State NC Zip Code 27278

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

Name of Employer BCBSNC Occupation VP

Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1108.32

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 2 / 2 0 0 8

Transaction ID: SA11AI.69788

Amount of Each Receipt this Period

58.93

C.

Full Name (Last, First, Middle Initial)

Cynthia Brenneman

Mailing Address 14 Steepleton Court

City Hillsborough State NC Zip Code 27278

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

Name of Employer BCBSNC Occupation VP

Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1167.25

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 6 / 2 0 0 8

Transaction ID: SA11AI.69964

Amount of Each Receipt this Period

58.93

SUBTOTAL of Receipts This Page (optional) ▶

176.79

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 / 200
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Milo Brunick		Date of Receipt
	Mailing Address 4020 Grayson Ridge Court		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 07 / 03 / 2008
	City	State	Zip Code
	Raleigh	NC	27613
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.68858
Name of Employer BCBSNC		Occupation VP	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 85.14
		<input type="text"/> 470.28	

B.	Full Name (Last, First, Middle Initial) Milo Brunick		Date of Receipt
	Mailing Address 4020 Grayson Ridge Court		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 07 / 18 / 2008
	City	State	Zip Code
	Raleigh	NC	27613
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.69028
Name of Employer BCBSNC		Occupation VP	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 85.14
		<input type="text"/> 555.42	

C.	Full Name (Last, First, Middle Initial) Milo Brunick		Date of Receipt
	Mailing Address 4020 Grayson Ridge Court		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 08 / 01 / 2008
	City	State	Zip Code
	Raleigh	NC	27613
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.69264
Name of Employer BCBSNC		Occupation VP	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 85.14
		<input type="text"/> 640.56	

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 255.42
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 28 / 200

(check only one)

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

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NAME OF COMMITTEE (In Full)

Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Milo Brunick

Mailing Address 4020 Grayson Ridge Court

City State Zip Code
Raleigh NC 27613

FEC ID number of contributing federal political committee.

C

Name of Employer
BCBSNC

Occupation
VP

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

725.70

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 1 5 / 2 0 0 8

Transaction ID: SA11AI.69443

Amount of Each Receipt this Period

85.14

B.

Full Name (Last, First, Middle Initial)

Milo Brunick

Mailing Address 4020 Grayson Ridge Court

City State Zip Code
Raleigh NC 27613

FEC ID number of contributing federal political committee.

C

Name of Employer
BCBSNC

Occupation
VP

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

810.84

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 2 9 / 2 0 0 8

Transaction ID: SA11AI.69616

Amount of Each Receipt this Period

85.14

C.

Full Name (Last, First, Middle Initial)

Milo Brunick

Mailing Address 4020 Grayson Ridge Court

City State Zip Code
Raleigh NC 27613

FEC ID number of contributing federal political committee.

C

Name of Employer
BCBSNC

Occupation
VP

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

895.98

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 2 / 2 0 0 8

Transaction ID: SA11AI.69792

Amount of Each Receipt this Period

85.14

SUBTOTAL of Receipts This Page (optional) ▶

255.42

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 29 / 200
(check only one)

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

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Milo Brunick

Mailing Address 4020 Grayson Ridge Court

City Raleigh State NC Zip Code 27613

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

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 981.12

Date of Receipt 09 / 26 / 2008

Transaction ID: SA11AI.69968

Amount of Each Receipt this Period 85.14

B.

Full Name (Last, First, Middle Initial)
L Lisa Cade

Mailing Address 104 Ackworth Court

City Cary State NC Zip Code 27519

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

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 700.00

Date of Receipt 07 / 03 / 2008

Transaction ID: SA11AI.68861

Amount of Each Receipt this Period 50.00

C.

Full Name (Last, First, Middle Initial)
L Lisa Cade

Mailing Address 104 Ackworth Court

City Cary State NC Zip Code 27519

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

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt 07 / 18 / 2008

Transaction ID: SA11AI.69031

Amount of Each Receipt this Period 50.00

SUBTOTAL of Receipts This Page (optional) ► 185.14

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 30 / 200
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) L Lisa Cade	Date of Receipt MM / DD / YYYY 08 / 01 / 2008
	Mailing Address 104 Ackworth Court	Transaction ID: SA11AI.69267
	City Cary State NC Zip Code 27519	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation VP Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 800.00	

B.	Full Name (Last, First, Middle Initial) L Lisa Cade	Date of Receipt MM / DD / YYYY 08 / 15 / 2008
	Mailing Address 104 Ackworth Court	Transaction ID: SA11AI.69446
	City Cary State NC Zip Code 27519	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation VP Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 850.00	

C.	Full Name (Last, First, Middle Initial) L Lisa Cade	Date of Receipt MM / DD / YYYY 08 / 29 / 2008
	Mailing Address 104 Ackworth Court	Transaction ID: SA11AI.69619
	City Cary State NC Zip Code 27519	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation VP Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 900.00	

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 31 / 200

(check only one)

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

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NAME OF COMMITTEE (In Full)

Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

L Lisa Cade

Mailing Address 104 Ackworth Court

City State Zip Code
Cary NC 27519

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

Name of Employer Occupation
BCBSNC VP

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 950.00

Date of Receipt

M M / D D / Y Y Y Y
09 / 12 / 2008

Transaction ID: SA11AI.69795

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

L Lisa Cade

Mailing Address 104 Ackworth Court

City State Zip Code
Cary NC 27519

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

Name of Employer Occupation
BCBSNC VP

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1000.00

Date of Receipt

M M / D D / Y Y Y Y
09 / 26 / 2008

Transaction ID: SA11AI.69971

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

Michele Cash

Mailing Address 8094 Grassy Creek Road

City State Zip Code
Oxford NC 27565

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

Name of Employer Occupation
BCBSNC Senior Compensation Advisor

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 361.84

Date of Receipt

M M / D D / Y Y Y Y
07 / 03 / 2008

Transaction ID: SA11AI.68864

Amount of Each Receipt this Period

26.21

SUBTOTAL of Receipts This Page (optional) ▶

126.21

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 / 200
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Michele Cash	Date of Receipt MM / DD / YYYY 07 / 18 / 2008
	Mailing Address 8094 Grassy Creek Road	Transaction ID: SA11AI.69034
	City Oxford State NC Zip Code 27565	Amount of Each Receipt this Period 26.21
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation Senior Compensation Advisor Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 388.05	

B.	Full Name (Last, First, Middle Initial) Michele Cash	Date of Receipt MM / DD / YYYY 08 / 01 / 2008
	Mailing Address 8094 Grassy Creek Road	Transaction ID: SA11AI.69270
	City Oxford State NC Zip Code 27565	Amount of Each Receipt this Period 26.21
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation Senior Compensation Advisor Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 414.26	

C.	Full Name (Last, First, Middle Initial) Michele Cash	Date of Receipt MM / DD / YYYY 08 / 15 / 2008
	Mailing Address 8094 Grassy Creek Road	Transaction ID: SA11AI.69449
	City Oxford State NC Zip Code 27565	Amount of Each Receipt this Period 26.21
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation Senior Compensation Advisor Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 440.47	

SUBTOTAL of Receipts This Page (optional)	78.63
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 33 / 200
(check only one)

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

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial) Michele Cash		Date of Receipt MM / DD / YYYY 08 / 29 / 2008
Mailing Address 8094 Grassy Creek Road		Transaction ID: SA11AI.69622
City Oxford	State NC	Zip Code 27565
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 26.21
Name of Employer BCBSNC	Occupation Senior Compensation Advisor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 466.68	

B.

Full Name (Last, First, Middle Initial) Michele Cash		Date of Receipt MM / DD / YYYY 09 / 12 / 2008
Mailing Address 8094 Grassy Creek Road		Transaction ID: SA11AI.69798
City Oxford	State NC	Zip Code 27565
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 26.21
Name of Employer BCBSNC	Occupation Senior Compensation Advisor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 492.89	

C.

Full Name (Last, First, Middle Initial) Michele Cash		Date of Receipt MM / DD / YYYY 09 / 26 / 2008
Mailing Address 8094 Grassy Creek Road		Transaction ID: SA11AI.69974
City Oxford	State NC	Zip Code 27565
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 26.21
Name of Employer BCBSNC	Occupation Senior Compensation Advisor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 519.10	

SUBTOTAL of Receipts This Page (optional)	▶	78.63
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 34 / 200
(check only one)

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

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 North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial) Steven Cherrier		Date of Receipt MM / DD / YYYY 07 / 03 / 2008	
Mailing Address 1207 Holly Creek Lane		Transaction ID: SA11AI.68866	
City Chapel Hill	State NC	Zip Code 27516	Amount of Each Receipt this Period 20.00
FEC ID number of contributing federal political committee. C			
Name of Employer BCBSNC	Occupation Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 280.00		

B.

Full Name (Last, First, Middle Initial) Steven Cherrier		Date of Receipt MM / DD / YYYY 07 / 18 / 2008	
Mailing Address 1207 Holly Creek Lane		Transaction ID: SA11AI.69036	
City Chapel Hill	State NC	Zip Code 27516	Amount of Each Receipt this Period 20.00
FEC ID number of contributing federal political committee. C			
Name of Employer BCBSNC	Occupation Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

C.

Full Name (Last, First, Middle Initial) Steven Cherrier		Date of Receipt MM / DD / YYYY 08 / 01 / 2008	
Mailing Address 1207 Holly Creek Lane		Transaction ID: SA11AI.69272	
City Chapel Hill	State NC	Zip Code 27516	Amount of Each Receipt this Period 20.00
FEC ID number of contributing federal political committee. C			
Name of Employer BCBSNC	Occupation Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 320.00		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 / 200
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Steven Cherrier	Date of Receipt MM / DD / YYYY 08 / 15 / 2008
	Mailing Address 1207 Holly Creek Lane	Transaction ID: SA11AI.69450
	City State Zip Code Chapel Hill NC 27516	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 340.00	

B.	Full Name (Last, First, Middle Initial) Steven Cherrier	Date of Receipt MM / DD / YYYY 08 / 29 / 2008
	Mailing Address 1207 Holly Creek Lane	Transaction ID: SA11AI.69623
	City State Zip Code Chapel Hill NC 27516	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 360.00	

C.	Full Name (Last, First, Middle Initial) Steven Cherrier	Date of Receipt MM / DD / YYYY 09 / 12 / 2008
	Mailing Address 1207 Holly Creek Lane	Transaction ID: SA11AI.69799
	City State Zip Code Chapel Hill NC 27516	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 380.00	

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 36 / 200
(check only one)

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

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial) Steven Cherrier		Date of Receipt MM / DD / YYYY 09 / 26 / 2008	
Mailing Address 1207 Holly Creek Lane		Transaction ID: SA11AI.69975	
City Chapel Hill	State NC	Zip Code 27516	Amount of Each Receipt this Period 20.00
FEC ID number of contributing federal political committee. C			
Name of Employer BCBSNC	Occupation Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00		

B.

Full Name (Last, First, Middle Initial) Geoffrey Clasper		Date of Receipt MM / DD / YYYY 07 / 03 / 2008	
Mailing Address 708 Pinehurst Drive		Transaction ID: SA11AI.68867	
City Chapel Hill	State NC	Zip Code 27517	Amount of Each Receipt this Period 40.00
FEC ID number of contributing federal political committee. C			
Name of Employer BCBSNC	Occupation VP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 560.00		

C.

Full Name (Last, First, Middle Initial) Geoffrey Clasper		Date of Receipt MM / DD / YYYY 07 / 18 / 2008	
Mailing Address 708 Pinehurst Drive		Transaction ID: SA11AI.69037	
City Chapel Hill	State NC	Zip Code 27517	Amount of Each Receipt this Period 40.00
FEC ID number of contributing federal political committee. C			
Name of Employer BCBSNC	Occupation VP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 / 200
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Geoffrey Clasper		Date of Receipt	
	Mailing Address 708 Pinehurst Drive		M M / D D / Y Y Y Y 08 / 01 / 2008	
	City	State	Zip Code	Transaction ID: SA11AI.69273
	Chapel Hill	NC	27517	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		40.00	
Name of Employer BCBSNC		Occupation VP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		640.00		

B.	Full Name (Last, First, Middle Initial) Geoffrey Clasper		Date of Receipt	
	Mailing Address 708 Pinehurst Drive		M M / D D / Y Y Y Y 08 / 15 / 2008	
	City	State	Zip Code	Transaction ID: SA11AI.69451
	Chapel Hill	NC	27517	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		40.00	
Name of Employer BCBSNC		Occupation VP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		680.00		

C.	Full Name (Last, First, Middle Initial) Geoffrey Clasper		Date of Receipt	
	Mailing Address 708 Pinehurst Drive		M M / D D / Y Y Y Y 08 / 29 / 2008	
	City	State	Zip Code	Transaction ID: SA11AI.69626
	Chapel Hill	NC	27517	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		40.00	
Name of Employer BCBSNC		Occupation VP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		720.00		

SUBTOTAL of Receipts This Page (optional)	▶	120.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 38 / 200

(check only one)

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

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NAME OF COMMITTEE (In Full)

Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Geoffrey Clasper

Mailing Address 708 Pinehurst Drive

City State Zip Code
Chapel Hill NC 27517

FEC ID number of contributing federal political committee.

C

Name of Employer
BCBSNC

Occupation
VP

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

760.00

Date of Receipt

M M / D D / Y Y Y Y
09 / 12 / 2008

Transaction ID: SA11AI.69801

Amount of Each Receipt this Period

40.00

B.

Full Name (Last, First, Middle Initial)

Geoffrey Clasper

Mailing Address 708 Pinehurst Drive

City State Zip Code
Chapel Hill NC 27517

FEC ID number of contributing federal political committee.

C

Name of Employer
BCBSNC

Occupation
VP

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y
09 / 26 / 2008

Transaction ID: SA11AI.69977

Amount of Each Receipt this Period

40.00

C.

Full Name (Last, First, Middle Initial)

M Stephen Dean

Mailing Address 505 Lake Hogan Farm Rd

City State Zip Code
Chapel Hill NC 27516

FEC ID number of contributing federal political committee.

C

Name of Employer
BCBSNC

Occupation
VP

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

546.01

Date of Receipt

M M / D D / Y Y Y Y
07 / 03 / 2008

Transaction ID: SA11AI.68875

Amount of Each Receipt this Period

54.79

SUBTOTAL of Receipts This Page (optional)

134.79

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 39 / 200

(check only one)

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

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NAME OF COMMITTEE (In Full)

Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

M Stephen Dean

Mailing Address 505 Lake Hogan Farm Rd

City State Zip Code
Chapel Hill NC 27516

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

Name of Employer Occupation
BCBSNC VP

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 600.80

Date of Receipt

M M / D D / Y Y Y Y
07 18 2008

Transaction ID: SA11AI.69045

Amount of Each Receipt this Period
54.79

B.

Full Name (Last, First, Middle Initial)

M Stephen Dean

Mailing Address 505 Lake Hogan Farm Rd

City State Zip Code
Chapel Hill NC 27516

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

Name of Employer Occupation
BCBSNC VP

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 655.59

Date of Receipt

M M / D D / Y Y Y Y
08 01 2008

Transaction ID: SA11AI.69283

Amount of Each Receipt this Period
54.79

C.

Full Name (Last, First, Middle Initial)

M Stephen Dean

Mailing Address 505 Lake Hogan Farm Rd

City State Zip Code
Chapel Hill NC 27516

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

Name of Employer Occupation
BCBSNC VP

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 710.38

Date of Receipt

M M / D D / Y Y Y Y
08 15 2008

Transaction ID: SA11AI.69460

Amount of Each Receipt this Period
54.79

SUBTOTAL of Receipts This Page (optional) ▶

164.37

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 / 200
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) M Stephen Dean		Date of Receipt	
	Mailing Address 505 Lake Hogan Farm Rd		M M / D D / Y Y Y Y 0 8 / 2 9 / 2 0 0 8	
	City	State	Zip Code	Transaction ID: SA11AI.69635
	Chapel Hill	NC	27516	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		54.79	
Name of Employer BCBSNC		Occupation VP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		765.17		

B.	Full Name (Last, First, Middle Initial) M Stephen Dean		Date of Receipt	
	Mailing Address 505 Lake Hogan Farm Rd		M M / D D / Y Y Y Y 0 9 / 1 2 / 2 0 0 8	
	City	State	Zip Code	Transaction ID: SA11AI.69810
	Chapel Hill	NC	27516	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		54.79	
Name of Employer BCBSNC		Occupation VP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		819.96		

C.	Full Name (Last, First, Middle Initial) M Stephen Dean		Date of Receipt	
	Mailing Address 505 Lake Hogan Farm Rd		M M / D D / Y Y Y Y 0 9 / 2 6 / 2 0 0 8	
	City	State	Zip Code	Transaction ID: SA11AI.69986
	Chapel Hill	NC	27516	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		54.79	
Name of Employer BCBSNC		Occupation VP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		874.75		

SUBTOTAL of Receipts This Page (optional)	▶	164.37
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 / 200
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) M Karen Dickinson		Date of Receipt MM / DD / YYYY 08 / 01 / 2008		
	Mailing Address 105 Corewood Court		Transaction ID: SA11AI.69287		
	City Durham	State NC	Zip Code 27713	Amount of Each Receipt this Period 26.66	
	FEC ID number of contributing federal political committee. C				
	Name of Employer BCBSNC	Occupation Director	Aggregate Year-to-Date 213.28		

B.	Full Name (Last, First, Middle Initial) M Karen Dickinson		Date of Receipt MM / DD / YYYY 08 / 15 / 2008		
	Mailing Address 105 Corewood Court		Transaction ID: SA11AI.69463		
	City Durham	State NC	Zip Code 27713	Amount of Each Receipt this Period 26.66	
	FEC ID number of contributing federal political committee. C				
	Name of Employer BCBSNC	Occupation Director	Aggregate Year-to-Date 239.94		

C.	Full Name (Last, First, Middle Initial) M Karen Dickinson		Date of Receipt MM / DD / YYYY 08 / 29 / 2008		
	Mailing Address 105 Corewood Court		Transaction ID: SA11AI.69638		
	City Durham	State NC	Zip Code 27713	Amount of Each Receipt this Period 26.66	
	FEC ID number of contributing federal political committee. C				
	Name of Employer BCBSNC	Occupation Director	Aggregate Year-to-Date 266.60		

SUBTOTAL of Receipts This Page (optional)	79.98
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 / 200
	<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 North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) M Karen Dickinson	Date of Receipt MM / DD / YYYY 09 / 12 / 2008
	Mailing Address 105 Corewood Court	Transaction ID: SA11AI.69813
	City State Zip Code Durham NC 27713	Amount of Each Receipt this Period 26.66
	FEC ID number of contributing federal political committee. C	
Name of Employer BCBSNC	Occupation Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 293.26	

B.	Full Name (Last, First, Middle Initial) M Karen Dickinson	Date of Receipt MM / DD / YYYY 09 / 26 / 2008
	Mailing Address 105 Corewood Court	Transaction ID: SA11AI.69989
	City State Zip Code Durham NC 27713	Amount of Each Receipt this Period 26.66
	FEC ID number of contributing federal political committee. C	
Name of Employer BCBSNC	Occupation Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 319.92	

C.	Full Name (Last, First, Middle Initial) Lynn Duffy	Date of Receipt MM / DD / YYYY 07 / 03 / 2008
	Mailing Address 111 Suffolk Place	Transaction ID: SA11AI.68880
	City State Zip Code Chapel Hill NC 27516	Amount of Each Receipt this Period 52.35
	FEC ID number of contributing federal political committee. C	
Name of Employer BCBSNC	Occupation VP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 727.80	

SUBTOTAL of Receipts This Page (optional)	105.67
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 43 / 200
(check only one)

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

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Lynn Duffy

Mailing Address 111 Suffolk Place

City State Zip Code
Chapel Hill NC 27516

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

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
780.15

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 18 / 2008

Transaction ID: SA11AI.69050

Amount of Each Receipt this Period
52.35

B.

Full Name (Last, First, Middle Initial)
Lynn Duffy

Mailing Address 111 Suffolk Place

City State Zip Code
Chapel Hill NC 27516

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

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
832.50

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 01 / 2008

Transaction ID: SA11AI.69290

Amount of Each Receipt this Period
52.35

C.

Full Name (Last, First, Middle Initial)
Lynn Duffy

Mailing Address 111 Suffolk Place

City State Zip Code
Chapel Hill NC 27516

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

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
884.85

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 15 / 2008

Transaction ID: SA11AI.69466

Amount of Each Receipt this Period
52.35

SUBTOTAL of Receipts This Page (optional) ► **157.05**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 / 200
	<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 North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Lynn Duffy		Date of Receipt
	Mailing Address 111 Suffolk Place		<input type="text" value="08"/> / <input type="text" value="29"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Chapel Hill	NC	27516
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.69641
Name of Employer BCBSNC		Occupation VP	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="52.35"/>
		<input type="text" value="937.20"/>	

B.	Full Name (Last, First, Middle Initial) Lynn Duffy		Date of Receipt
	Mailing Address 111 Suffolk Place		<input type="text" value="09"/> / <input type="text" value="12"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Chapel Hill	NC	27516
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.69816
Name of Employer BCBSNC		Occupation VP	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="52.35"/>
		<input type="text" value="989.55"/>	

C.	Full Name (Last, First, Middle Initial) Lynn Duffy		Date of Receipt
	Mailing Address 111 Suffolk Place		<input type="text" value="09"/> / <input type="text" value="26"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Chapel Hill	NC	27516
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.69992
Name of Employer BCBSNC		Occupation VP	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="52.35"/>
		<input type="text" value="1041.90"/>	

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="157.05"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 45 / 200
(check only one)

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

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 North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial)
James Emmons

Mailing Address 105 Vyne Court

City Cary State NC Zip Code 27519

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

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1069.87

Date of Receipt: 07 / 03 / 2008
Transaction ID: SA11AI.68883
 Amount of Each Receipt this Period: 77.88

B.

Full Name (Last, First, Middle Initial)
James Emmons

Mailing Address 105 Vyne Court

City Cary State NC Zip Code 27519

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

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1147.75

Date of Receipt: 07 / 18 / 2008
Transaction ID: SA11AI.69053
 Amount of Each Receipt this Period: 77.88

C.

Full Name (Last, First, Middle Initial)
James Emmons

Mailing Address 105 Vyne Court

City Cary State NC Zip Code 27519

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

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1225.63

Date of Receipt: 08 / 01 / 2008
Transaction ID: SA11AI.69293
 Amount of Each Receipt this Period: 77.88

SUBTOTAL of Receipts This Page (optional) ► 233.64

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 46 / 200
(check only one)

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

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial)
James Emmons

Mailing Address 105 Vyne Court

City Cary State NC Zip Code 27519

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

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1303.51

Date of Receipt: 08 / 15 / 2008
Transaction ID: SA11AI.69469
 Amount of Each Receipt this Period: 77.88

B.

Full Name (Last, First, Middle Initial)
James Emmons

Mailing Address 105 Vyne Court

City Cary State NC Zip Code 27519

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

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1381.39

Date of Receipt: 08 / 29 / 2008
Transaction ID: SA11AI.69644
 Amount of Each Receipt this Period: 77.88

C.

Full Name (Last, First, Middle Initial)
James Emmons

Mailing Address 105 Vyne Court

City Cary State NC Zip Code 27519

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

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1459.27

Date of Receipt: 09 / 12 / 2008
Transaction ID: SA11AI.69819
 Amount of Each Receipt this Period: 77.88

SUBTOTAL of Receipts This Page (optional) ► 233.64

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 47 / 200
(check only one)

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

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 North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial)
James Emmons

Mailing Address 105 Vyne Court

City State Zip Code
Cary NC 27519

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

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1537.15

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 26 / 2008

Transaction ID: SA11AI.69995

Amount of Each Receipt this Period
77.88

B.

Full Name (Last, First, Middle Initial)
M Robert Fleming

Mailing Address 211 St. Mary's Street

City State Zip Code
Raleigh NC 27605

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

Name of Employer BCBSNC Occupation Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 708.15

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 03 / 2008

Transaction ID: SA11AI.68884

Amount of Each Receipt this Period
51.20

C.

Full Name (Last, First, Middle Initial)
M Robert Fleming

Mailing Address 211 St. Mary's Street

City State Zip Code
Raleigh NC 27605

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

Name of Employer BCBSNC Occupation Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 759.35

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 18 / 2008

Transaction ID: SA11AI.69054

Amount of Each Receipt this Period
51.20

SUBTOTAL of Receipts This Page (optional) ► **180.28**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 48 / 200
(check only one)

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

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial)
M Robert Fleming

Mailing Address 211 St. Mary's Street

City Raleigh State NC Zip Code 27605

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

Name of Employer BCBSNC Occupation Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 810.55

Date of Receipt 08 / 01 / 2008

Transaction ID: SA11AI.69294

Amount of Each Receipt this Period 51.20

B.

Full Name (Last, First, Middle Initial)
M Robert Fleming

Mailing Address 211 St. Mary's Street

City Raleigh State NC Zip Code 27605

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

Name of Employer BCBSNC Occupation Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 861.75

Date of Receipt 08 / 15 / 2008

Transaction ID: SA11AI.69470

Amount of Each Receipt this Period 51.20

C.

Full Name (Last, First, Middle Initial)
M Robert Fleming

Mailing Address 211 St. Mary's Street

City Raleigh State NC Zip Code 27605

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

Name of Employer BCBSNC Occupation Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 912.95

Date of Receipt 08 / 29 / 2008

Transaction ID: SA11AI.69645

Amount of Each Receipt this Period 51.20

SUBTOTAL of Receipts This Page (optional) ► 153.60

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 49 / 200
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial)
M Robert Fleming

Mailing Address 211 St. Mary's Street

City Raleigh State NC Zip Code 27605

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

Name of Employer BCBSNC Occupation Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 964.15

Date of Receipt: 09 / 12 / 2008
Transaction ID: SA11AI.69820
Amount of Each Receipt this Period: 51.20

B.

Full Name (Last, First, Middle Initial)
M Robert Fleming

Mailing Address 211 St. Mary's Street

City Raleigh State NC Zip Code 27605

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

Name of Employer BCBSNC Occupation Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1015.35

Date of Receipt: 09 / 26 / 2008
Transaction ID: SA11AI.69996
Amount of Each Receipt this Period: 51.20

C.

Full Name (Last, First, Middle Initial)
John Friesen

Mailing Address 50009 Brogden

City Chapel Hill State NC Zip Code 27514

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

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1456.08

Date of Receipt: 07 / 03 / 2008
Transaction ID: SA11AI.68885
Amount of Each Receipt this Period: 105.17

SUBTOTAL of Receipts This Page (optional) ► 207.57

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 / 200
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial)
John Friesen

Mailing Address 50009 Brogden

City State Zip Code
Chapel Hill NC 27514

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

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1561.25

Date of Receipt
MM / DD / YYYY
07 / 18 / 2008

Transaction ID: SA11AI.69055

Amount of Each Receipt this Period
105.17

B.

Full Name (Last, First, Middle Initial)
John Friesen

Mailing Address 50009 Brogden

City State Zip Code
Chapel Hill NC 27514

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

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1666.42

Date of Receipt
MM / DD / YYYY
08 / 01 / 2008

Transaction ID: SA11AI.69295

Amount of Each Receipt this Period
105.17

C.

Full Name (Last, First, Middle Initial)
John Friesen

Mailing Address 50009 Brogden

City State Zip Code
Chapel Hill NC 27514

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

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1768.88

Date of Receipt
MM / DD / YYYY
08 / 15 / 2008

Transaction ID: SA11AI.69471

Amount of Each Receipt this Period
102.46

SUBTOTAL of Receipts This Page (optional) ► **312.80**

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 / 200
(check only one)
 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)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. Full Name (Last, First, Middle Initial)
John Friesen
 Mailing Address 50009 Brogden
 City State Zip Code
 Chapel Hill NC 27514
 FEC ID number of contributing federal political committee. **C**
 Name of Employer BCBSNC Occupation VP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1874.05
 Date of Receipt M M / D D / Y Y Y Y Y
 0 8 / 2 9 / 2 0 0 8
Transaction ID: SA11AI.69646
 Amount of Each Receipt this Period 105.17

B. Full Name (Last, First, Middle Initial)
John Friesen
 Mailing Address 50009 Brogden
 City State Zip Code
 Chapel Hill NC 27514
 FEC ID number of contributing federal political committee. **C**
 Name of Employer BCBSNC Occupation VP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1979.22
 Date of Receipt M M / D D / Y Y Y Y Y
 0 9 / 1 2 / 2 0 0 8
Transaction ID: SA11AI.69821
 Amount of Each Receipt this Period 105.17

C. Full Name (Last, First, Middle Initial)
John Friesen
 Mailing Address 50009 Brogden
 City State Zip Code
 Chapel Hill NC 27514
 FEC ID number of contributing federal political committee. **C**
 Name of Employer BCBSNC Occupation VP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2084.39
 Date of Receipt M M / D D / Y Y Y Y Y
 0 9 / 2 6 / 2 0 0 8
Transaction ID: SA11AI.69999
 Amount of Each Receipt this Period 105.17

SUBTOTAL of Receipts This Page (optional) ► 315.51
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 52 / 200
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Celia Fuller		Date of Receipt MM / DD / YYYY 07 / 03 / 2008		
	Mailing Address 6114 Westglen Dr		Transaction ID: SA11AI.68886		
	City Raleigh	State NC	Zip Code 27612	Amount of Each Receipt this Period 40.62	
	FEC ID number of contributing federal political committee. C				
	Name of Employer BCBSNC	Occupation Resource/Technical Director			
	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 560.88			

B.	Full Name (Last, First, Middle Initial) Celia Fuller		Date of Receipt MM / DD / YYYY 07 / 18 / 2008		
	Mailing Address 6114 Westglen Dr		Transaction ID: SA11AI.69056		
	City Raleigh	State NC	Zip Code 27612	Amount of Each Receipt this Period 40.62	
	FEC ID number of contributing federal political committee. C				
	Name of Employer BCBSNC	Occupation Resource/Technical Director			
	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 601.50			

C.	Full Name (Last, First, Middle Initial) Celia Fuller		Date of Receipt MM / DD / YYYY 08 / 01 / 2008		
	Mailing Address 6114 Westglen Dr		Transaction ID: SA11AI.69296		
	City Raleigh	State NC	Zip Code 27612	Amount of Each Receipt this Period 40.62	
	FEC ID number of contributing federal political committee. C				
	Name of Employer BCBSNC	Occupation Resource/Technical Director			
	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 642.12			

SUBTOTAL of Receipts This Page (optional)	▶	121.86
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER: PAGE 53 / 200

(check only one)

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

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 North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Celia Fuller

Mailing Address 6114 Westglen Dr

City State Zip Code
Raleigh NC 27612

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

Name of Employer Occupation
BCBSNC Resource/Technical Director

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 682.74

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	5		2	0	0	8

Transaction ID: SA11AI.69472

Amount of Each Receipt this Period

40.62

B.

Full Name (Last, First, Middle Initial)

Celia Fuller

Mailing Address 6114 Westglen Dr

City State Zip Code
Raleigh NC 27612

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

Name of Employer Occupation
BCBSNC Resource/Technical Director

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 723.36

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	9		2	0	0	8

Transaction ID: SA11AI.69647

Amount of Each Receipt this Period

40.62

C.

Full Name (Last, First, Middle Initial)

Celia Fuller

Mailing Address 6114 Westglen Dr

City State Zip Code
Raleigh NC 27612

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

Name of Employer Occupation
BCBSNC Resource/Technical Director

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 763.98

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	2		2	0	0	8

Transaction ID: SA11AI.69822

Amount of Each Receipt this Period

40.62

SUBTOTAL of Receipts This Page (optional) ▶

121.86

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 54 / 200
(check only one)

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

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Celia Fuller

Mailing Address 6114 Westglen Dr

City Raleigh State NC Zip Code 27612

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

Name of Employer BCBSNC Occupation Resource/Technical Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 804.60

Date of Receipt 09 / 26 / 2008

Transaction ID: SA11AI.70000

Amount of Each Receipt this Period 40.62

B.

Full Name (Last, First, Middle Initial)
Kathi Gaines

Mailing Address 603 Kingswood Drive

City Cary State NC Zip Code 27513

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

Name of Employer BCBSNC Occupation Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 699.79

Date of Receipt 07 / 03 / 2008

Transaction ID: SA11AI.68887

Amount of Each Receipt this Period 50.51

C.

Full Name (Last, First, Middle Initial)
Kathi Gaines

Mailing Address 603 Kingswood Drive

City Cary State NC Zip Code 27513

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

Name of Employer BCBSNC Occupation Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 750.30

Date of Receipt 07 / 18 / 2008

Transaction ID: SA11AI.69057

Amount of Each Receipt this Period 50.51

SUBTOTAL of Receipts This Page (optional) ► 141.64

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 55 / 200
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Kathi Gaines		Date of Receipt
	Mailing Address 603 Kingswood Drive		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	Cary	NC	27513
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.69297
Name of Employer BCBSNC		Occupation Director	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/>
		<input type="text"/> 800.81	<input type="text"/> 50.51

B.	Full Name (Last, First, Middle Initial) Kathi Gaines		Date of Receipt
	Mailing Address 603 Kingswood Drive		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	Cary	NC	27513
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.69473
Name of Employer BCBSNC		Occupation Director	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/>
		<input type="text"/> 851.32	<input type="text"/> 50.51

C.	Full Name (Last, First, Middle Initial) Kathi Gaines		Date of Receipt
	Mailing Address 603 Kingswood Drive		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	Cary	NC	27513
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.69648
Name of Employer BCBSNC		Occupation Director	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/>
		<input type="text"/> 901.83	<input type="text"/> 50.51

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 151.53
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 56 / 200
(check only one)

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

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 North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Kathi Gaines

Mailing Address 603 Kingswood Drive

City Cary State NC Zip Code 27513

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

Name of Employer BCBSNC Occupation Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 952.34

Date of Receipt: 09 / 12 / 2008
Transaction ID: SA11AI.69823
Amount of Each Receipt this Period: 50.51

B.

Full Name (Last, First, Middle Initial)
Kathi Gaines

Mailing Address 603 Kingswood Drive

City Cary State NC Zip Code 27513

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

Name of Employer BCBSNC Occupation Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1002.85

Date of Receipt: 09 / 26 / 2008
Transaction ID: SA11AI.70001
Amount of Each Receipt this Period: 50.51

C.

Full Name (Last, First, Middle Initial)
Lynne Garrison

Mailing Address 806 Green Passage Lane

City Apex State NC Zip Code 27502

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

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 951.18

Date of Receipt: 07 / 03 / 2008
Transaction ID: SA11AI.68889
Amount of Each Receipt this Period: 68.42

SUBTOTAL of Receipts This Page (optional) ► 169.44

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 / 200
(check only one)

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

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Lynne Garrison

Mailing Address 806 Green Passage Lane

City State Zip Code
Apex NC 27502

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

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1019.60

Date of Receipt
MM / DD / YYYY
07 / 18 / 2008

Transaction ID: SA11AI.69059

Amount of Each Receipt this Period
68.42

B.

Full Name (Last, First, Middle Initial)
Lynne Garrison

Mailing Address 806 Green Passage Lane

City State Zip Code
Apex NC 27502

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

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1088.02

Date of Receipt
MM / DD / YYYY
08 / 01 / 2008

Transaction ID: SA11AI.69299

Amount of Each Receipt this Period
68.42

C.

Full Name (Last, First, Middle Initial)
Lynne Garrison

Mailing Address 806 Green Passage Lane

City State Zip Code
Apex NC 27502

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

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1156.44

Date of Receipt
MM / DD / YYYY
08 / 15 / 2008

Transaction ID: SA11AI.69475

Amount of Each Receipt this Period
68.42

SUBTOTAL of Receipts This Page (optional) ► **205.26**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 58 / 200
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Lynne Garrison	Date of Receipt MM / DD / YYYY 08 / 29 / 2008
	Mailing Address 806 Green Passage Lane	Transaction ID: SA11AI.69650
	City State Zip Code Apex NC 27502	Amount of Each Receipt this Period 68.42
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation VP Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 1224.86	

B.	Full Name (Last, First, Middle Initial) Lynne Garrison	Date of Receipt MM / DD / YYYY 09 / 12 / 2008
	Mailing Address 806 Green Passage Lane	Transaction ID: SA11AI.69825
	City State Zip Code Apex NC 27502	Amount of Each Receipt this Period 68.42
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation VP Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 1293.28	

C.	Full Name (Last, First, Middle Initial) Lynne Garrison	Date of Receipt MM / DD / YYYY 09 / 26 / 2008
	Mailing Address 806 Green Passage Lane	Transaction ID: SA11AI.70003
	City State Zip Code Apex NC 27502	Amount of Each Receipt this Period 68.42
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation VP Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 1361.70	

SUBTOTAL of Receipts This Page (optional)	205.26
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 / 200
(check only one)

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

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial)
K Patrick Getzen

Mailing Address 205 Chilcott

City State Zip Code
Apex NC 27502

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

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
915.71

Date of Receipt
MM / DD / YYYY
07 / 03 / 2008

Transaction ID: SA11AI.68891

Amount of Each Receipt this Period
66.49

B.

Full Name (Last, First, Middle Initial)
K Patrick Getzen

Mailing Address 205 Chilcott

City State Zip Code
Apex NC 27502

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

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
982.20

Date of Receipt
MM / DD / YYYY
07 / 18 / 2008

Transaction ID: SA11AI.69061

Amount of Each Receipt this Period
66.49

C.

Full Name (Last, First, Middle Initial)
K Patrick Getzen

Mailing Address 205 Chilcott

City State Zip Code
Apex NC 27502

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

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1048.69

Date of Receipt
MM / DD / YYYY
08 / 01 / 2008

Transaction ID: SA11AI.69301

Amount of Each Receipt this Period
66.49

SUBTOTAL of Receipts This Page (optional) ► **199.47**

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 / 200
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial)
K Patrick Getzen

Mailing Address 205 Chilcott

City State Zip Code
Apex NC 27502

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

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1115.18

Date of Receipt
MM / DD / YYYY
08 / 15 / 2008

Transaction ID: SA11AI.69477

Amount of Each Receipt this Period
66.49

B.

Full Name (Last, First, Middle Initial)
K Patrick Getzen

Mailing Address 205 Chilcott

City State Zip Code
Apex NC 27502

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

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1181.67

Date of Receipt
MM / DD / YYYY
08 / 29 / 2008

Transaction ID: SA11AI.69652

Amount of Each Receipt this Period
66.49

C.

Full Name (Last, First, Middle Initial)
K Patrick Getzen

Mailing Address 205 Chilcott

City State Zip Code
Apex NC 27502

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

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1248.16

Date of Receipt
MM / DD / YYYY
09 / 12 / 2008

Transaction ID: SA11AI.69827

Amount of Each Receipt this Period
66.49

SUBTOTAL of Receipts This Page (optional) ► **199.47**

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 61 / 200
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial)
K Patrick Getzen

Mailing Address 205 Chilcott

City State Zip Code
Apex NC 27502

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

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1314.65

Date of Receipt
M M / D D / Y Y Y Y
09 / 26 / 2008

Transaction ID: SA11AI.70005

Amount of Each Receipt this Period
66.49

B.

Full Name (Last, First, Middle Initial)
Daniel Glaser

Mailing Address 3613 Hathaway Road

City State Zip Code
Durham NC 27707

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

Name of Employer BCBSNC Occupation SVP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2692.20

Date of Receipt
M M / D D / Y Y Y Y
07 / 03 / 2008

Transaction ID: SA11AI.68892

Amount of Each Receipt this Period
192.30

C.

Full Name (Last, First, Middle Initial)
Daniel Glaser

Mailing Address 3613 Hathaway Road

City State Zip Code
Durham NC 27707

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

Name of Employer BCBSNC Occupation SVP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2884.50

Date of Receipt
M M / D D / Y Y Y Y
07 / 18 / 2008

Transaction ID: SA11AI.69062

Amount of Each Receipt this Period
192.30

SUBTOTAL of Receipts This Page (optional) ▶ **451.09**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 62 / 200
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial) Daniel Glaser		Date of Receipt MM / DD / YYYY 08 / 01 / 2008	
Mailing Address 3613 Hathaway Road		Transaction ID: SA11AI.69302	
City Durham	State NC	Zip Code 27707	Amount of Each Receipt this Period 192.30
FEC ID number of contributing federal political committee. C			
Name of Employer BCBSNC	Occupation SVP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3076.80		

B.

Full Name (Last, First, Middle Initial) Daniel Glaser		Date of Receipt MM / DD / YYYY 08 / 15 / 2008	
Mailing Address 3613 Hathaway Road		Transaction ID: SA11AI.69478	
City Durham	State NC	Zip Code 27707	Amount of Each Receipt this Period 192.30
FEC ID number of contributing federal political committee. C			
Name of Employer BCBSNC	Occupation SVP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3269.10		

C.

Full Name (Last, First, Middle Initial) Daniel Glaser		Date of Receipt MM / DD / YYYY 08 / 29 / 2008	
Mailing Address 3613 Hathaway Road		Transaction ID: SA11AI.69653	
City Durham	State NC	Zip Code 27707	Amount of Each Receipt this Period 192.30
FEC ID number of contributing federal political committee. C			
Name of Employer BCBSNC	Occupation SVP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3461.40		

SUBTOTAL of Receipts This Page (optional)	576.90
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 63 / 200
	<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 North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Daniel Glaser		Date of Receipt
	Mailing Address 3613 Hathaway Road		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 09 / 12 / 2008
	City	State	Zip Code
	Durham	NC	27707
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.69828
Name of Employer BCBSNC		Occupation SVP	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 192.30
		<input type="text"/> 3653.70	

B.	Full Name (Last, First, Middle Initial) Daniel Glaser		Date of Receipt
	Mailing Address 3613 Hathaway Road		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 09 / 26 / 2008
	City	State	Zip Code
	Durham	NC	27707
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.70006
Name of Employer BCBSNC		Occupation SVP	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 192.30
		<input type="text"/> 3846.00	

C.	Full Name (Last, First, Middle Initial) K Ian Gordon		Date of Receipt
	Mailing Address 100 Village Circle Way Apt337		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 07 / 03 / 2008
	City	State	Zip Code
	Durham	NC	27713
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.68894
Name of Employer BCBSNC		Occupation SVP	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 111.54
		<input type="text"/> 1561.56	

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 496.14
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 64 / 200
(check only one)

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

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial) K Ian Gordon		Date of Receipt MM / DD / YYYY 07 / 18 / 2008
Mailing Address 100 Village Circle Way Apt337		Transaction ID: SA11AI.69064
City Durham	State NC	Zip Code 27713
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 111.54
Name of Employer BCBSNC	Occupation SVP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1673.10	

B.

Full Name (Last, First, Middle Initial) K Ian Gordon		Date of Receipt MM / DD / YYYY 08 / 01 / 2008
Mailing Address 100 Village Circle Way Apt337		Transaction ID: SA11AI.69304
City Durham	State NC	Zip Code 27713
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 111.54
Name of Employer BCBSNC	Occupation SVP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1784.64	

C.

Full Name (Last, First, Middle Initial) K Ian Gordon		Date of Receipt MM / DD / YYYY 08 / 15 / 2008
Mailing Address 100 Village Circle Way Apt337		Transaction ID: SA11AI.69480
City Durham	State NC	Zip Code 27713
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 111.54
Name of Employer BCBSNC	Occupation SVP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1896.18	

SUBTOTAL of Receipts This Page (optional)	334.62
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 65 / 200
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) K Ian Gordon	Date of Receipt MM / DD / YYYY 08 / 29 / 2008
	Mailing Address 100 Village Circle Way Apt337	Transaction ID: SA11AI.69655
	City State Zip Code Durham NC 27713	Amount of Each Receipt this Period 111.54
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation SVP Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 2007.72	

B.	Full Name (Last, First, Middle Initial) K Ian Gordon	Date of Receipt MM / DD / YYYY 09 / 12 / 2008
	Mailing Address 100 Village Circle Way Apt337	Transaction ID: SA11AI.69830
	City State Zip Code Durham NC 27713	Amount of Each Receipt this Period 111.54
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation SVP Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 2119.26	

C.	Full Name (Last, First, Middle Initial) K Ian Gordon	Date of Receipt MM / DD / YYYY 09 / 26 / 2008
	Mailing Address 100 Village Circle Way Apt337	Transaction ID: SA11AI.70008
	City State Zip Code Durham NC 27713	Amount of Each Receipt this Period 111.54
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation SVP Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 2230.80	

SUBTOTAL of Receipts This Page (optional)	334.62
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 66 / 200		
	<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

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Laura Gorry			Date of Receipt MM / DD / YYYY 07 / 03 / 2008		
	Mailing Address 2566 Ironwood Drive			Transaction ID: SA11AI.68895		
	City Hickory	State NC	Zip Code 28602	Amount of Each Receipt this Period 33.65		
	FEC ID number of contributing federal political committee. C					
	Name of Employer BCBSNC		Occupation Regional Service Manager	Aggregate Year-to-Date 457.10		

B.	Full Name (Last, First, Middle Initial) Laura Gorry			Date of Receipt MM / DD / YYYY 07 / 18 / 2008		
	Mailing Address 2566 Ironwood Drive			Transaction ID: SA11AI.69065		
	City Hickory	State NC	Zip Code 28602	Amount of Each Receipt this Period 33.65		
	FEC ID number of contributing federal political committee. C					
	Name of Employer BCBSNC		Occupation Regional Service Manager	Aggregate Year-to-Date 490.75		

C.	Full Name (Last, First, Middle Initial) Laura Gorry			Date of Receipt MM / DD / YYYY 08 / 01 / 2008		
	Mailing Address 2566 Ironwood Drive			Transaction ID: SA11AI.69305		
	City Hickory	State NC	Zip Code 28602	Amount of Each Receipt this Period 33.65		
	FEC ID number of contributing federal political committee. C					
	Name of Employer BCBSNC		Occupation Regional Service Manager	Aggregate Year-to-Date 524.40		

SUBTOTAL of Receipts This Page (optional)	100.95
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 67 / 200
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial) Laura Gorry		Date of Receipt MM / DD / YYYY 08 / 15 / 2008	
Mailing Address 2566 Ironwood Drive		Transaction ID: SA11AI.69481	
City Hickory	State NC	Zip Code 28602	Amount of Each Receipt this Period 33.65
FEC ID number of contributing federal political committee. C			
Name of Employer BCBSNC	Occupation Regional Service Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 558.05		

B.

Full Name (Last, First, Middle Initial) Laura Gorry		Date of Receipt MM / DD / YYYY 08 / 29 / 2008	
Mailing Address 2566 Ironwood Drive		Transaction ID: SA11AI.69656	
City Hickory	State NC	Zip Code 28602	Amount of Each Receipt this Period 33.65
FEC ID number of contributing federal political committee. C			
Name of Employer BCBSNC	Occupation Regional Service Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 591.70		

C.

Full Name (Last, First, Middle Initial) Laura Gorry		Date of Receipt MM / DD / YYYY 09 / 12 / 2008	
Mailing Address 2566 Ironwood Drive		Transaction ID: SA11AI.69831	
City Hickory	State NC	Zip Code 28602	Amount of Each Receipt this Period 33.65
FEC ID number of contributing federal political committee. C			
Name of Employer BCBSNC	Occupation Regional Service Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 625.35		

SUBTOTAL of Receipts This Page (optional)	▶	100.95
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 68 / 200		
	<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

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Laura Gorry		Date of Receipt MM / DD / YYYY 09 / 26 / 2008		
	Mailing Address 2566 Ironwood Drive		Transaction ID: SA11AI.70009		
	City Hickory	State NC	Zip Code 28602	Amount of Each Receipt this Period 33.65	
	FEC ID number of contributing federal political committee. C				
	Name of Employer BCBSNC	Occupation Regional Service Manager			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 659.00			

B.	Full Name (Last, First, Middle Initial) Robert Greczyn		Date of Receipt MM / DD / YYYY 07 / 03 / 2008		
	Mailing Address 113 Richelieu Dr.		Transaction ID: SA11AI.68896		
	City Cary	State NC	Zip Code 27511	Amount of Each Receipt this Period 192.30	
	FEC ID number of contributing federal political committee. C				
	Name of Employer BCBSNC	Occupation President & CEO			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 2692.20			

C.	Full Name (Last, First, Middle Initial) Robert Greczyn		Date of Receipt MM / DD / YYYY 07 / 18 / 2008		
	Mailing Address 113 Richelieu Dr.		Transaction ID: SA11AI.69066		
	City Cary	State NC	Zip Code 27511	Amount of Each Receipt this Period 192.30	
	FEC ID number of contributing federal political committee. C				
	Name of Employer BCBSNC	Occupation President & CEO			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 2884.50			

SUBTOTAL of Receipts This Page (optional)	▶	418.25
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 69 / 200
	<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 North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Robert Greczyn		Date of Receipt	
	Mailing Address 113 Richelieu Dr.		M M / D D / Y Y Y Y Y 08 / 01 / 2008	
	City	State	Zip Code	Transaction ID: SA11AI.69306
	Cary	NC	27511	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		192.30
Name of Employer BCBSNC		Occupation President & CEO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 3076.80		

B.	Full Name (Last, First, Middle Initial) Robert Greczyn		Date of Receipt	
	Mailing Address 113 Richelieu Dr.		M M / D D / Y Y Y Y Y 08 / 15 / 2008	
	City	State	Zip Code	Transaction ID: SA11AI.69482
	Cary	NC	27511	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		192.30
Name of Employer BCBSNC		Occupation President & CEO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 3269.10		

C.	Full Name (Last, First, Middle Initial) Robert Greczyn		Date of Receipt	
	Mailing Address 113 Richelieu Dr.		M M / D D / Y Y Y Y Y 08 / 29 / 2008	
	City	State	Zip Code	Transaction ID: SA11AI.69657
	Cary	NC	27511	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		192.30
Name of Employer BCBSNC		Occupation President & CEO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 3461.40		

SUBTOTAL of Receipts This Page (optional)	▶	576.90
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 70 / 200
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Robert Greczyn		Date of Receipt
	Mailing Address 113 Richelieu Dr.		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 09 / 12 / 2008
	City	State	Zip Code
	Cary	NC	27511
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.69832
Name of Employer BCBSNC		Occupation President & CEO	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 3653.70	<input type="text"/> 192.30

B.	Full Name (Last, First, Middle Initial) Robert Greczyn		Date of Receipt
	Mailing Address 113 Richelieu Dr.		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 09 / 26 / 2008
	City	State	Zip Code
	Cary	NC	27511
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.70010
Name of Employer BCBSNC		Occupation President & CEO	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 3846.00	<input type="text"/> 192.30

C.	Full Name (Last, First, Middle Initial) Mr. Darrell Grissom, II		Date of Receipt
	Mailing Address 1105 New Hampshire Drive		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 07 / 18 / 2008
	City	State	Zip Code
	Jamestown	NC	27282
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.69067
Name of Employer BCBSNC		Occupation Consumer Sales Manager	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 203.40	<input type="text"/> 13.56

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 398.16
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 71 / 200
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Mr. Darrell Grissom, II		Date of Receipt
	Mailing Address 1105 New Hampshire Drive		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 08 / 01 / 2008
	City	State	Zip Code
	Jamestown	NC	27282
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.69307
Name of Employer BCBSNC		Occupation Consumer Sales Manager	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 216.96	<input type="text"/> 13.56

B.	Full Name (Last, First, Middle Initial) Mr. Darrell Grissom, II		Date of Receipt
	Mailing Address 1105 New Hampshire Drive		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 08 / 15 / 2008
	City	State	Zip Code
	Jamestown	NC	27282
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.69483
Name of Employer BCBSNC		Occupation Consumer Sales Manager	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 230.52	<input type="text"/> 13.56

C.	Full Name (Last, First, Middle Initial) Mr. Darrell Grissom, II		Date of Receipt
	Mailing Address 1105 New Hampshire Drive		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 08 / 29 / 2008
	City	State	Zip Code
	Jamestown	NC	27282
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.69658
Name of Employer BCBSNC		Occupation Consumer Sales Manager	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 244.08	<input type="text"/> 13.56

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 40.68
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 72 / 200
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Mr. Darrell Grissom, II

Mailing Address 1105 New Hampshire Drive

City State Zip Code
Jamestown NC 27282

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

Name of Employer BCBSNC Occupation Consumer Sales Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 257.64

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 12 / 2008

Transaction ID: SA11AI.69833

Amount of Each Receipt this Period
13.56

B.

Full Name (Last, First, Middle Initial)
Mr. Darrell Grissom, II

Mailing Address 1105 New Hampshire Drive

City State Zip Code
Jamestown NC 27282

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

Name of Employer BCBSNC Occupation Consumer Sales Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 271.20

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 26 / 2008

Transaction ID: SA11AI.70011

Amount of Each Receipt this Period
13.56

C.

Full Name (Last, First, Middle Initial)
Danny Gunselman

Mailing Address 3018 Annandale Road

City State Zip Code
Durham NC 27705

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

Name of Employer BCBSNC Occupation Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 440.66

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 03 / 2008

Transaction ID: SA11AI.68898

Amount of Each Receipt this Period
31.84

SUBTOTAL of Receipts This Page (optional) ► 58.96

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 73 / 200
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Danny Gunselman		Date of Receipt
	Mailing Address 3018 Annandale Road		<input type="text" value="07"/> / <input type="text" value="18"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Durham	NC	27705
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.69068
Name of Employer BCBSNC		Occupation Director	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 472.50	<input type="text" value="31.84"/>

B.	Full Name (Last, First, Middle Initial) Danny Gunselman		Date of Receipt
	Mailing Address 3018 Annandale Road		<input type="text" value="08"/> / <input type="text" value="01"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Durham	NC	27705
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.69308
Name of Employer BCBSNC		Occupation Director	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 504.34	<input type="text" value="31.84"/>

C.	Full Name (Last, First, Middle Initial) Danny Gunselman		Date of Receipt
	Mailing Address 3018 Annandale Road		<input type="text" value="08"/> / <input type="text" value="15"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Durham	NC	27705
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.69484
Name of Employer BCBSNC		Occupation Director	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 536.18	<input type="text" value="31.84"/>

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="95.52"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 74 / 200
	<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 North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Danny Gunselman		Date of Receipt
	Mailing Address 3018 Annandale Road		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	Durham	NC	27705
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.69659
Name of Employer BCBSNC		Occupation Director	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 31.84
		<input type="text"/> 568.02	

B.	Full Name (Last, First, Middle Initial) Danny Gunselman		Date of Receipt
	Mailing Address 3018 Annandale Road		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	Durham	NC	27705
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.69834
Name of Employer BCBSNC		Occupation Director	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 31.84
		<input type="text"/> 599.86	

C.	Full Name (Last, First, Middle Initial) Danny Gunselman		Date of Receipt
	Mailing Address 3018 Annandale Road		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	Durham	NC	27705
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.70012
Name of Employer BCBSNC		Occupation Director	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 31.84
		<input type="text"/> 631.70	

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 95.52
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 75 / 200
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Charles Harvey

Mailing Address 426 Holly Springs Dr

City State Zip Code
Timberlake NC 27583

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

Name of Employer BCBSNC Occupation Inst. Designer & Developer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 208.96

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

Transaction ID: SA11AI.69310

Amount of Each Receipt this Period
13.21

B.

Full Name (Last, First, Middle Initial)
Charles Harvey

Mailing Address 426 Holly Springs Dr

City State Zip Code
Timberlake NC 27583

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

Name of Employer BCBSNC Occupation Inst. Designer & Developer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 222.17

Date of Receipt
M M / D D / Y Y Y Y Y
0 8 / 1 5 / 2 0 0 8

Transaction ID: SA11AI.69486

Amount of Each Receipt this Period
13.21

C.

Full Name (Last, First, Middle Initial)
Charles Harvey

Mailing Address 426 Holly Springs Dr

City State Zip Code
Timberlake NC 27583

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

Name of Employer BCBSNC Occupation Inst. Designer & Developer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 235.38

Date of Receipt
M M / D D / Y Y Y Y Y
0 8 / 2 9 / 2 0 0 8

Transaction ID: SA11AI.69661

Amount of Each Receipt this Period
13.21

SUBTOTAL of Receipts This Page (optional) ► 39.63

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 76 / 200
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Charles Harvey		Date of Receipt MM / DD / YYYY 09 / 12 / 2008		
	Mailing Address 426 Holly Springs Dr		Transaction ID: SA11AI.69836		
	City Timberlake	State NC	Zip Code 27583	Amount of Each Receipt this Period 13.21	
	FEC ID number of contributing federal political committee. C				
	Name of Employer BCBSNC	Occupation Inst. Designer & Developer	Aggregate Year-to-Date 248.59		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

B.	Full Name (Last, First, Middle Initial) Charles Harvey		Date of Receipt MM / DD / YYYY 09 / 26 / 2008		
	Mailing Address 426 Holly Springs Dr		Transaction ID: SA11AI.70014		
	City Timberlake	State NC	Zip Code 27583	Amount of Each Receipt this Period 13.21	
	FEC ID number of contributing federal political committee. C				
	Name of Employer BCBSNC	Occupation Inst. Designer & Developer	Aggregate Year-to-Date 261.80		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

C.	Full Name (Last, First, Middle Initial) Sarah Hearn		Date of Receipt MM / DD / YYYY 07 / 03 / 2008		
	Mailing Address 1181 Bowers Store Road		Transaction ID: SA11AI.68904		
	City Siler City	State NC	Zip Code 27344	Amount of Each Receipt this Period 19.46	
	FEC ID number of contributing federal political committee. C				
	Name of Employer BCBSNC	Occupation Manager	Aggregate Year-to-Date 270.99		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

SUBTOTAL of Receipts This Page (optional)	▶	45.88
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 77 / 200
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Sarah Hearn

Mailing Address 1181 Bowers Store Road

City State Zip Code
Siler City NC 27344

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

Name of Employer BCBSNC Occupation Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
290.45

Date of Receipt
MM / DD / YYYY
07 / 18 / 2008

Transaction ID: SA11AI.69074

Amount of Each Receipt this Period
19.46

B.

Full Name (Last, First, Middle Initial)
Sarah Hearn

Mailing Address 1181 Bowers Store Road

City State Zip Code
Siler City NC 27344

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

Name of Employer BCBSNC Occupation Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
309.91

Date of Receipt
MM / DD / YYYY
08 / 01 / 2008

Transaction ID: SA11AI.69314

Amount of Each Receipt this Period
19.46

C.

Full Name (Last, First, Middle Initial)
Sarah Hearn

Mailing Address 1181 Bowers Store Road

City State Zip Code
Siler City NC 27344

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

Name of Employer BCBSNC Occupation Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
329.37

Date of Receipt
MM / DD / YYYY
08 / 15 / 2008

Transaction ID: SA11AI.69490

Amount of Each Receipt this Period
19.46

SUBTOTAL of Receipts This Page (optional) ► **58.38**

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 / 200
(check only one)

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

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial) Sarah Hearn		Date of Receipt MM / DD / YYYY 08 / 29 / 2008
Mailing Address 1181 Bowers Store Road		Transaction ID: SA11AI.69665
City Siler City	State NC	Zip Code 27344
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 19.46
Name of Employer BCBSNC	Occupation Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 348.83	

B.

Full Name (Last, First, Middle Initial) Sarah Hearn		Date of Receipt MM / DD / YYYY 09 / 12 / 2008
Mailing Address 1181 Bowers Store Road		Transaction ID: SA11AI.69840
City Siler City	State NC	Zip Code 27344
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 19.46
Name of Employer BCBSNC	Occupation Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 368.29	

C.

Full Name (Last, First, Middle Initial) Sarah Hearn		Date of Receipt MM / DD / YYYY 09 / 26 / 2008
Mailing Address 1181 Bowers Store Road		Transaction ID: SA11AI.70020
City Siler City	State NC	Zip Code 27344
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 19.46
Name of Employer BCBSNC	Occupation Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 387.75	

SUBTOTAL of Receipts This Page (optional)	58.38
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 / 200
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Ms Susan Helm-Murtagh

Mailing Address 117 Oldham Place

City State Zip Code
Chapel Hill NC 27516

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

Name of Employer BCBSNC Occupation Resource Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 760.35

Date of Receipt
MM / DD / YYYY
07 / 03 / 2008

Transaction ID: SA11AI.68905

Amount of Each Receipt this Period
67.31

B.

Full Name (Last, First, Middle Initial)
Ms Susan Helm-Murtagh

Mailing Address 117 Oldham Place

City State Zip Code
Chapel Hill NC 27516

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

Name of Employer BCBSNC Occupation Resource Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 827.66

Date of Receipt
MM / DD / YYYY
07 / 18 / 2008

Transaction ID: SA11AI.69075

Amount of Each Receipt this Period
67.31

C.

Full Name (Last, First, Middle Initial)
Ms Susan Helm-Murtagh

Mailing Address 117 Oldham Place

City State Zip Code
Chapel Hill NC 27516

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

Name of Employer BCBSNC Occupation Resource Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 894.97

Date of Receipt
MM / DD / YYYY
08 / 01 / 2008

Transaction ID: SA11AI.69315

Amount of Each Receipt this Period
67.31

SUBTOTAL of Receipts This Page (optional) ► **201.93**

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 / 200
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Ms Susan Helm-Murtagh

Mailing Address 117 Oldham Place

City State Zip Code
Chapel Hill NC 27516

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

Name of Employer BCBSNC Occupation Resource Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 962.28

Date of Receipt
MM / DD / YYYY
08 / 15 / 2008

Transaction ID: SA11AI.69491

Amount of Each Receipt this Period
67.31

B.

Full Name (Last, First, Middle Initial)
Ms Susan Helm-Murtagh

Mailing Address 117 Oldham Place

City State Zip Code
Chapel Hill NC 27516

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

Name of Employer BCBSNC Occupation Resource Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1029.59

Date of Receipt
MM / DD / YYYY
08 / 29 / 2008

Transaction ID: SA11AI.69666

Amount of Each Receipt this Period
67.31

C.

Full Name (Last, First, Middle Initial)
Ms Susan Helm-Murtagh

Mailing Address 117 Oldham Place

City State Zip Code
Chapel Hill NC 27516

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

Name of Employer BCBSNC Occupation Resource Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1096.90

Date of Receipt
MM / DD / YYYY
09 / 12 / 2008

Transaction ID: SA11AI.69841

Amount of Each Receipt this Period
67.31

SUBTOTAL of Receipts This Page (optional) ► **201.93**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 81 / 200
	<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 North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Ms Susan Helm-Murtagh	Date of Receipt
	Mailing Address 117 Oldham Place	<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 09 / 26 / 2008
	City State Zip Code Chapel Hill NC 27516	Transaction ID: SA11AI.70021
	FEC ID number of contributing federal political committee. <input type="text"/> C <input type="text"/>	Amount of Each Receipt this Period <input type="text"/> 67.31
	Name of Employer BCBSNC Occupation Resource Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <input type="text"/> 1164.21	

B.	Full Name (Last, First, Middle Initial) Ms Kathryn Higgins	Date of Receipt
	Mailing Address 734 Crabtree Crossing	<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 07 / 03 / 2008
	City State Zip Code Cary NC 27513	Transaction ID: SA11AI.68909
	FEC ID number of contributing federal political committee. <input type="text"/> C <input type="text"/>	Amount of Each Receipt this Period <input type="text"/> 39.00
	Name of Employer BCBSNC Occupation Sr. Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <input type="text"/> 390.00	

C.	Full Name (Last, First, Middle Initial) Ms Kathryn Higgins	Date of Receipt
	Mailing Address 734 Crabtree Crossing	<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 07 / 18 / 2008
	City State Zip Code Cary NC 27513	Transaction ID: SA11AI.69079
	FEC ID number of contributing federal political committee. <input type="text"/> C <input type="text"/>	Amount of Each Receipt this Period <input type="text"/> 39.00
	Name of Employer BCBSNC Occupation Sr. Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <input type="text"/> 429.00	

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 145.31
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 82 / 200
(check only one)

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

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Ms Kathryn Higgins

Mailing Address 734 Crabtree Crossing

City Cary State NC Zip Code 27513

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

Name of Employer BCBSNC Occupation Sr. Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 468.00

Date of Receipt: 08 / 01 / 2008
Transaction ID: SA11AI.69319
Amount of Each Receipt this Period: 39.00

B.

Full Name (Last, First, Middle Initial)
Ms Kathryn Higgins

Mailing Address 734 Crabtree Crossing

City Cary State NC Zip Code 27513

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

Name of Employer BCBSNC Occupation Sr. Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 507.00

Date of Receipt: 08 / 15 / 2008
Transaction ID: SA11AI.69495
Amount of Each Receipt this Period: 39.00

C.

Full Name (Last, First, Middle Initial)
Ms Kathryn Higgins

Mailing Address 734 Crabtree Crossing

City Cary State NC Zip Code 27513

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

Name of Employer BCBSNC Occupation Sr. Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 546.00

Date of Receipt: 08 / 29 / 2008
Transaction ID: SA11AI.69670
Amount of Each Receipt this Period: 39.00

SUBTOTAL of Receipts This Page (optional) ► 117.00

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 83 / 200

(check only one)

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

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NAME OF COMMITTEE (In Full)

Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Ms Kathryn Higgins

Mailing Address 734 Crabtree Crossing

City State Zip Code
Cary NC 27513

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

Name of Employer Occupation
BCBSNC Sr. Director

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

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 2 / 2 0 0 8

Transaction ID: SA11AI.69845

Amount of Each Receipt this Period

39.00

B.

Full Name (Last, First, Middle Initial)

Ms Kathryn Higgins

Mailing Address 734 Crabtree Crossing

City State Zip Code
Cary NC 27513

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

Name of Employer Occupation
BCBSNC Sr. Director

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 624.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 6 / 2 0 0 8

Transaction ID: SA11AI.70025

Amount of Each Receipt this Period

39.00

C.

Full Name (Last, First, Middle Initial)

L Terry Johnson

Mailing Address 203 E Aycock Street

City State Zip Code
Raleigh NC 27608

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

Name of Employer Occupation
BCBSNC VP

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 828.41

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 0 3 / 2 0 0 8

Transaction ID: SA11AI.68915

Amount of Each Receipt this Period

59.59

SUBTOTAL of Receipts This Page (optional)

137.59

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 84 / 200
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial)
L Terry Johnson

Mailing Address 203 E Aycok Street

City Raleigh State NC Zip Code 27608

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

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 888.00

Date of Receipt: 07 / 18 / 2008
Transaction ID: SA11AI.69085
 Amount of Each Receipt this Period: 59.59

B.

Full Name (Last, First, Middle Initial)
L Terry Johnson

Mailing Address 203 E Aycok Street

City Raleigh State NC Zip Code 27608

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

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 947.59

Date of Receipt: 08 / 01 / 2008
Transaction ID: SA11AI.69327
 Amount of Each Receipt this Period: 59.59

C.

Full Name (Last, First, Middle Initial)
L Terry Johnson

Mailing Address 203 E Aycok Street

City Raleigh State NC Zip Code 27608

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

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1007.18

Date of Receipt: 08 / 15 / 2008
Transaction ID: SA11AI.69502
 Amount of Each Receipt this Period: 59.59

SUBTOTAL of Receipts This Page (optional) ► 178.77

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 85 / 200
	<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 North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) L Terry Johnson	Date of Receipt MM / DD / YYYY 08 / 29 / 2008
	Mailing Address 203 E Aycok Street	Transaction ID: SA11AI.69677
	City Raleigh State NC Zip Code 27608	Amount of Each Receipt this Period 59.59
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation VP Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date 1066.77	

B.	Full Name (Last, First, Middle Initial) L Terry Johnson	Date of Receipt MM / DD / YYYY 09 / 12 / 2008
	Mailing Address 203 E Aycok Street	Transaction ID: SA11AI.69852
	City Raleigh State NC Zip Code 27608	Amount of Each Receipt this Period 5.96
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation VP Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date 1072.73	

C.	Full Name (Last, First, Middle Initial) Mr. James Kenley, Sr.	Date of Receipt MM / DD / YYYY 07 / 03 / 2008
	Mailing Address 4670 Elmhurst Drive NE	Transaction ID: SA11AI.68920
	City Hickory State NC Zip Code 28601	Amount of Each Receipt this Period 83.31
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation VP Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date 1152.29	

SUBTOTAL of Receipts This Page (optional)	148.86
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 86 / 200
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Mr. James Kenley, Sr.

Mailing Address 4670 Elmhurst Drive NE

City State Zip Code
Hickory NC 28601

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

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1235.60

Date of Receipt
MM / DD / YYYY
07 / 18 / 2008

Transaction ID: SA11AI.69090

Amount of Each Receipt this Period
83.31

B.

Full Name (Last, First, Middle Initial)
Mr. James Kenley, Sr.

Mailing Address 4670 Elmhurst Drive NE

City State Zip Code
Hickory NC 28601

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

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1318.91

Date of Receipt
MM / DD / YYYY
08 / 01 / 2008

Transaction ID: SA11AI.69332

Amount of Each Receipt this Period
83.31

C.

Full Name (Last, First, Middle Initial)
Mr. James Kenley, Sr.

Mailing Address 4670 Elmhurst Drive NE

City State Zip Code
Hickory NC 28601

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

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1402.22

Date of Receipt
MM / DD / YYYY
08 / 15 / 2008

Transaction ID: SA11AI.69507

Amount of Each Receipt this Period
83.31

SUBTOTAL of Receipts This Page (optional) ► **249.93**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 87 / 200
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Mr. James Kenley, Sr.		Date of Receipt	
	Mailing Address 4670 Elmhurst Drive NE		M M / D D / Y Y Y Y Y 0 8 / 2 9 / 2 0 0 8	
	City	State	Zip Code	Transaction ID: SA11AI.69682
	Hickory	NC	28601	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		83.31	
Name of Employer BCBSNC		Occupation VP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		1485.53		

B.	Full Name (Last, First, Middle Initial) Mr. James Kenley, Sr.		Date of Receipt	
	Mailing Address 4670 Elmhurst Drive NE		M M / D D / Y Y Y Y Y 0 9 / 1 2 / 2 0 0 8	
	City	State	Zip Code	Transaction ID: SA11AI.69857
	Hickory	NC	28601	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		83.31	
Name of Employer BCBSNC		Occupation VP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		1568.84		

C.	Full Name (Last, First, Middle Initial) Mr. James Kenley, Sr.		Date of Receipt	
	Mailing Address 4670 Elmhurst Drive NE		M M / D D / Y Y Y Y Y 0 9 / 2 6 / 2 0 0 8	
	City	State	Zip Code	Transaction ID: SA11AI.70036
	Hickory	NC	28601	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		83.31	
Name of Employer BCBSNC		Occupation VP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		1652.15		

SUBTOTAL of Receipts This Page (optional)	▶	249.93
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 88 / 200
(check only one)

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

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

NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial) M Eugenie Komives		Date of Receipt	
Mailing Address 3518 Bluestone Ct.		M M / D D / Y Y Y Y Y 07 / 03 / 2008	
City	State	Zip Code	Transaction ID: SA11AI.68922
Chapel Hill	NC	27514	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. C		92.97	
Name of Employer BCBSNC	Occupation Medical Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	1284.38	

B.

Full Name (Last, First, Middle Initial) M Eugenie Komives		Date of Receipt	
Mailing Address 3518 Bluestone Ct.		M M / D D / Y Y Y Y Y 07 / 18 / 2008	
City	State	Zip Code	Transaction ID: SA11AI.69092
Chapel Hill	NC	27514	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. C		92.97	
Name of Employer BCBSNC	Occupation Medical Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	1377.35	

C.

Full Name (Last, First, Middle Initial) M Eugenie Komives		Date of Receipt	
Mailing Address 3518 Bluestone Ct.		M M / D D / Y Y Y Y Y 08 / 01 / 2008	
City	State	Zip Code	Transaction ID: SA11AI.69334
Chapel Hill	NC	27514	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. C		92.97	
Name of Employer BCBSNC	Occupation Medical Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	1470.32	

SUBTOTAL of Receipts This Page (optional)	▶	278.91
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 89 / 200
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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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 North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial)
M Eugenie Komives

Mailing Address 3518 Bluestone Ct.

City State Zip Code
Chapel Hill NC 27514

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

Name of Employer BCBSNC Occupation Medical Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1563.29

Date of Receipt
M M / D D / Y Y Y Y Y
0 8 / 1 5 / 2 0 0 8

Transaction ID: SA11AI.69509

Amount of Each Receipt this Period
92.97

B.

Full Name (Last, First, Middle Initial)
M Eugenie Komives

Mailing Address 3518 Bluestone Ct.

City State Zip Code
Chapel Hill NC 27514

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

Name of Employer BCBSNC Occupation Medical Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1656.26

Date of Receipt
M M / D D / Y Y Y Y Y
0 8 / 2 9 / 2 0 0 8

Transaction ID: SA11AI.69684

Amount of Each Receipt this Period
92.97

C.

Full Name (Last, First, Middle Initial)
M Eugenie Komives

Mailing Address 3518 Bluestone Ct.

City State Zip Code
Chapel Hill NC 27514

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

Name of Employer BCBSNC Occupation Medical Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1749.23

Date of Receipt
M M / D D / Y Y Y Y Y
0 9 / 1 2 / 2 0 0 8

Transaction ID: SA11AI.69859

Amount of Each Receipt this Period
92.97

SUBTOTAL of Receipts This Page (optional) ► **278.91**

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 90 / 200
(check only one)

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

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial)
M Eugenie Komives

Mailing Address 3518 Bluestone Ct.

City State Zip Code
Chapel Hill NC 27514

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

Name of Employer BCBSNC Occupation Medical Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1842.20

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 26 / 2008

Transaction ID: SA11AI.70038

Amount of Each Receipt this Period
92.97

B.

Full Name (Last, First, Middle Initial)
Theresa Kroliczak

Mailing Address 117 Aycock ave

City State Zip Code
Burlington NC 27215

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

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 694.22

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 03 / 2008

Transaction ID: SA11AI.68924

Amount of Each Receipt this Period
63.46

C.

Full Name (Last, First, Middle Initial)
Theresa Kroliczak

Mailing Address 117 Aycock ave

City State Zip Code
Burlington NC 27215

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

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 757.68

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 18 / 2008

Transaction ID: SA11AI.69094

Amount of Each Receipt this Period
63.46

SUBTOTAL of Receipts This Page (optional) ► **219.89**

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 91 / 200
(check only one)

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

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. Full Name (Last, First, Middle Initial)
Theresa Kroliczak

Mailing Address 117 Aycock ave

City Burlington State NC Zip Code 27215

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

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 821.14

Date of Receipt: 08 / 01 / 2008
Transaction ID: SA11AI.69336
 Amount of Each Receipt this Period: 63.46

B. Full Name (Last, First, Middle Initial)
Theresa Kroliczak

Mailing Address 117 Aycock ave

City Burlington State NC Zip Code 27215

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

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 884.60

Date of Receipt: 08 / 15 / 2008
Transaction ID: SA11AI.69511
 Amount of Each Receipt this Period: 63.46

C. Full Name (Last, First, Middle Initial)
Theresa Kroliczak

Mailing Address 117 Aycock ave

City Burlington State NC Zip Code 27215

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

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 948.06

Date of Receipt: 08 / 29 / 2008
Transaction ID: SA11AI.69686
 Amount of Each Receipt this Period: 63.46

SUBTOTAL of Receipts This Page (optional) ► 190.38

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 92 / 200
(check only one)

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

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Theresa Kroliczak

Mailing Address 117 Aycock ave

City State Zip Code
Burlington NC 27215

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

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1011.52

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 12 / 2008

Transaction ID: SA11AI.69861

Amount of Each Receipt this Period
63.46

B.

Full Name (Last, First, Middle Initial)
Theresa Kroliczak

Mailing Address 117 Aycock ave

City State Zip Code
Burlington NC 27215

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

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1074.98

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 26 / 2008

Transaction ID: SA11AI.70040

Amount of Each Receipt this Period
63.46

C.

Full Name (Last, First, Middle Initial)
E George Lassiter

Mailing Address 1106 Bellenden Drive

City State Zip Code
Durham NC 27713

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

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1135.04

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 03 / 2008

Transaction ID: SA11AI.68925

Amount of Each Receipt this Period
82.31

SUBTOTAL of Receipts This Page (optional) ► **209.23**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 93 / 200
	<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 North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) E George Lassiter	Date of Receipt MM / DD / YYYY 07 / 18 / 2008
	Mailing Address 1106 Bellenden Drive	Transaction ID: SA11AI.69095
	City State Zip Code Durham NC 27713	Amount of Each Receipt this Period 82.31
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation VP Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 1217.35	

B.	Full Name (Last, First, Middle Initial) E George Lassiter	Date of Receipt MM / DD / YYYY 08 / 01 / 2008
	Mailing Address 1106 Bellenden Drive	Transaction ID: SA11AI.69337
	City State Zip Code Durham NC 27713	Amount of Each Receipt this Period 82.31
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation VP Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 1299.66	

C.	Full Name (Last, First, Middle Initial) E George Lassiter	Date of Receipt MM / DD / YYYY 08 / 15 / 2008
	Mailing Address 1106 Bellenden Drive	Transaction ID: SA11AI.69512
	City State Zip Code Durham NC 27713	Amount of Each Receipt this Period 82.31
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation VP Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 1381.97	

SUBTOTAL of Receipts This Page (optional)	246.93
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 94 / 200
	<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 North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) E George Lassiter		Date of Receipt	
	Mailing Address 1106 Bellenden Drive		M M / D D / Y Y Y Y Y 08 / 29 / 2008	
	City	State	Zip Code	Transaction ID: SA11AI.69687
	Durham	NC	27713	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		82.31	
Name of Employer BCBSNC		Occupation VP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		1464.28		

B.	Full Name (Last, First, Middle Initial) E George Lassiter		Date of Receipt	
	Mailing Address 1106 Bellenden Drive		M M / D D / Y Y Y Y Y 09 / 12 / 2008	
	City	State	Zip Code	Transaction ID: SA11AI.69862
	Durham	NC	27713	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		82.31	
Name of Employer BCBSNC		Occupation VP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		1546.59		

C.	Full Name (Last, First, Middle Initial) E George Lassiter		Date of Receipt	
	Mailing Address 1106 Bellenden Drive		M M / D D / Y Y Y Y Y 09 / 26 / 2008	
	City	State	Zip Code	Transaction ID: SA11AI.70041
	Durham	NC	27713	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		82.31	
Name of Employer BCBSNC		Occupation VP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		1628.90		

SUBTOTAL of Receipts This Page (optional)	▶	246.93
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 95 / 200
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Dr. Dayna Lucas		Date of Receipt
	Mailing Address 121 Breckenridge Pl		<input type="text" value="07"/> / <input type="text" value="03"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Chapel Hill	NC	27514
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer BCBSNC		Occupation Medical Director	Transaction ID: SA11AI.68926
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="350.00"/>	<input type="text" value="25.00"/>

B.	Full Name (Last, First, Middle Initial) Dr. Dayna Lucas		Date of Receipt
	Mailing Address 121 Breckenridge Pl		<input type="text" value="07"/> / <input type="text" value="18"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Chapel Hill	NC	27514
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer BCBSNC		Occupation Medical Director	Transaction ID: SA11AI.69096
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="375.00"/>	<input type="text" value="25.00"/>

C.	Full Name (Last, First, Middle Initial) Dr. Dayna Lucas		Date of Receipt
	Mailing Address 121 Breckenridge Pl		<input type="text" value="08"/> / <input type="text" value="01"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Chapel Hill	NC	27514
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer BCBSNC		Occupation Medical Director	Transaction ID: SA11AI.69338
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="400.00"/>	<input type="text" value="25.00"/>

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="75.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 96 / 200
	<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 North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Dr. Dayna Lucas		Date of Receipt
	Mailing Address 121 Breckenridge Pl		<input type="text" value="08"/> / <input type="text" value="15"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Chapel Hill	NC	27514
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.69513
Name of Employer BCBSNC		Occupation Medical Director	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="425.00"/>	<input type="text" value="25.00"/>

B.	Full Name (Last, First, Middle Initial) Dr. Dayna Lucas		Date of Receipt
	Mailing Address 121 Breckenridge Pl		<input type="text" value="08"/> / <input type="text" value="29"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Chapel Hill	NC	27514
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.69688
Name of Employer BCBSNC		Occupation Medical Director	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="450.00"/>	<input type="text" value="25.00"/>

C.	Full Name (Last, First, Middle Initial) Dr. Dayna Lucas		Date of Receipt
	Mailing Address 121 Breckenridge Pl		<input type="text" value="09"/> / <input type="text" value="12"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Chapel Hill	NC	27514
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.69863
Name of Employer BCBSNC		Occupation Medical Director	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="475.00"/>	<input type="text" value="25.00"/>

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="75.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 97 / 200
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Dr. Dayna Lucas		Date of Receipt
	Mailing Address 121 Breckenridge Pl		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	Chapel Hill	NC	27514
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.70042
Name of Employer BCBSNC		Occupation Medical Director	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00	<input type="text"/> 25.00

B.	Full Name (Last, First, Middle Initial) Debra MacClennan		Date of Receipt
	Mailing Address 400 Lakeshore Lane		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	Chapel Hill	NC	27514
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.68928
Name of Employer BCBSNC		Occupation VP	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1077.16	<input type="text"/> 76.94

C.	Full Name (Last, First, Middle Initial) Debra MacClennan		Date of Receipt
	Mailing Address 400 Lakeshore Lane		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	Chapel Hill	NC	27514
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.69098
Name of Employer BCBSNC		Occupation VP	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1154.10	<input type="text"/> 76.94

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 178.88
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 98 / 200
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial) Debra MacClennan		Date of Receipt MM / DD / YYYY 08 / 01 / 2008	
Mailing Address 400 Lakeshore Lane		Transaction ID: SA11AI.69340	
City Chapel Hill	State NC	Zip Code 27514	Amount of Each Receipt this Period 76.94
FEC ID number of contributing federal political committee. C			
Name of Employer BCBSNC	Occupation VP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1231.04		

B.

Full Name (Last, First, Middle Initial) Debra MacClennan		Date of Receipt MM / DD / YYYY 08 / 15 / 2008	
Mailing Address 400 Lakeshore Lane		Transaction ID: SA11AI.69515	
City Chapel Hill	State NC	Zip Code 27514	Amount of Each Receipt this Period 76.94
FEC ID number of contributing federal political committee. C			
Name of Employer BCBSNC	Occupation VP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1307.98		

C.

Full Name (Last, First, Middle Initial) Debra MacClennan		Date of Receipt MM / DD / YYYY 08 / 29 / 2008	
Mailing Address 400 Lakeshore Lane		Transaction ID: SA11AI.69690	
City Chapel Hill	State NC	Zip Code 27514	Amount of Each Receipt this Period 76.94
FEC ID number of contributing federal political committee. C			
Name of Employer BCBSNC	Occupation VP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1384.92		

SUBTOTAL of Receipts This Page (optional)	▶	230.82
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 99 / 200

(check only one)

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

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NAME OF COMMITTEE (In Full)

Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Debra MacClennan

Mailing Address 400 Lakeshore Lane

City State Zip Code
Chapel Hill NC 27514

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

Name of Employer Occupation
BCBSNC VP

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1461.86

Date of Receipt

M M / D D / Y Y Y Y
09 / 12 / 2008

Transaction ID: SA11AI.69865

Amount of Each Receipt this Period

76.94

B.

Full Name (Last, First, Middle Initial)

Debra MacClennan

Mailing Address 400 Lakeshore Lane

City State Zip Code
Chapel Hill NC 27514

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

Name of Employer Occupation
BCBSNC VP

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1538.80

Date of Receipt

M M / D D / Y Y Y Y
09 / 26 / 2008

Transaction ID: SA11AI.70044

Amount of Each Receipt this Period

76.94

C.

Full Name (Last, First, Middle Initial)

Laurie Mace

Mailing Address 105 Dutchess Lane

City State Zip Code
Chapel Hill NC 27514

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

Name of Employer Occupation
BCBSNC Project Manager

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.03

Date of Receipt

M M / D D / Y Y Y Y
07 / 03 / 2008

Transaction ID: SA11AI.68929

Amount of Each Receipt this Period

18.02

SUBTOTAL of Receipts This Page (optional) ▶

171.90

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 100 / 200
	<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 North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Laurie Mace	Date of Receipt MM / DD / YYYY 07 / 18 / 2008
	Mailing Address 105 Dutchess Lane	Transaction ID: SA11AI.69099
	City State Zip Code Chapel Hill NC 27514	Amount of Each Receipt this Period 18.02
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation Project Manager Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 268.05	

B.	Full Name (Last, First, Middle Initial) Laurie Mace	Date of Receipt MM / DD / YYYY 08 / 01 / 2008
	Mailing Address 105 Dutchess Lane	Transaction ID: SA11AI.69341
	City State Zip Code Chapel Hill NC 27514	Amount of Each Receipt this Period 18.02
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation Project Manager Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 286.07	

C.	Full Name (Last, First, Middle Initial) Laurie Mace	Date of Receipt MM / DD / YYYY 08 / 15 / 2008
	Mailing Address 105 Dutchess Lane	Transaction ID: SA11AI.69516
	City State Zip Code Chapel Hill NC 27514	Amount of Each Receipt this Period 18.02
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation Project Manager Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 304.09	

SUBTOTAL of Receipts This Page (optional)	54.06
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 / 200
(check only one)

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

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Laurie Mace

Mailing Address 105 Dutchess Lane

City State Zip Code
Chapel Hill NC 27514

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

Name of Employer Occupation
BCBSNC Project Manager

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 322.11

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 2 9 / 2 0 0 8

Transaction ID: SA11AI.69691

Amount of Each Receipt this Period

18.02

B.

Full Name (Last, First, Middle Initial)
Laurie Mace

Mailing Address 105 Dutchess Lane

City State Zip Code
Chapel Hill NC 27514

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

Name of Employer Occupation
BCBSNC Project Manager

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 340.13

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 2 / 2 0 0 8

Transaction ID: SA11AI.69866

Amount of Each Receipt this Period

18.02

C.

Full Name (Last, First, Middle Initial)
Joe McDowell

Mailing Address 165 Farmington Road

City State Zip Code
Grimesland NC 27837

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

Name of Employer Occupation
BCBSNC Regional Sales Director

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 224.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 0 3 / 2 0 0 8

Transaction ID: SA11AI.68931

Amount of Each Receipt this Period

16.00

SUBTOTAL of Receipts This Page (optional)

52.04

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 102 / 200
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Joe McDowell		Date of Receipt
	Mailing Address 165 Farmington Road		<input type="text" value="07"/> / <input type="text" value="18"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Grimesland	NC	27837
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer BCBSNC		Occupation Regional Sales Director	Transaction ID: SA11AI.69101
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="240.00"/>	<input type="text" value="16.00"/>

B.	Full Name (Last, First, Middle Initial) Joe McDowell		Date of Receipt
	Mailing Address 165 Farmington Road		<input type="text" value="08"/> / <input type="text" value="01"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Grimesland	NC	27837
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer BCBSNC		Occupation Regional Sales Director	Transaction ID: SA11AI.69345
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="256.00"/>	<input type="text" value="16.00"/>

C.	Full Name (Last, First, Middle Initial) Joe McDowell		Date of Receipt
	Mailing Address 165 Farmington Road		<input type="text" value="08"/> / <input type="text" value="15"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Grimesland	NC	27837
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer BCBSNC		Occupation Regional Sales Director	Transaction ID: SA11AI.69519
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="272.00"/>	<input type="text" value="16.00"/>

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="48.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 103 / 200
(check only one)

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

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. Full Name (Last, First, Middle Initial)
Joe McDowell

Mailing Address 165 Farmington Road

City State Zip Code
Grimesland NC 27837

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

Name of Employer BCBSNC Occupation Regional Sales Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 288.00

Date of Receipt
MM / DD / YYYY
08 / 29 / 2008

Transaction ID: SA11AI.69694

Amount of Each Receipt this Period
16.00

B. Full Name (Last, First, Middle Initial)
Joe McDowell

Mailing Address 165 Farmington Road

City State Zip Code
Grimesland NC 27837

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

Name of Employer BCBSNC Occupation Regional Sales Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 304.00

Date of Receipt
MM / DD / YYYY
09 / 12 / 2008

Transaction ID: SA11AI.69869

Amount of Each Receipt this Period
16.00

C. Full Name (Last, First, Middle Initial)
Joe McDowell

Mailing Address 165 Farmington Road

City State Zip Code
Grimesland NC 27837

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

Name of Employer BCBSNC Occupation Regional Sales Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 320.00

Date of Receipt
MM / DD / YYYY
09 / 26 / 2008

Transaction ID: SA11AI.70047

Amount of Each Receipt this Period
16.00

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)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 104 / 200
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial) Lynn McNeal		Date of Receipt MM / DD / YYYY 07 / 03 / 2008	
Mailing Address 185 Swansea Lane		Transaction ID: SA11AI.68934	
City Chapel Hill	State NC	Zip Code 27516	Amount of Each Receipt this Period 96.16
FEC ID number of contributing federal political committee. C			
Name of Employer BCBSNC	Occupation VP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1336.94		

B.

Full Name (Last, First, Middle Initial) Lynn McNeal		Date of Receipt MM / DD / YYYY 07 / 18 / 2008	
Mailing Address 185 Swansea Lane		Transaction ID: SA11AI.69104	
City Chapel Hill	State NC	Zip Code 27516	Amount of Each Receipt this Period 96.16
FEC ID number of contributing federal political committee. C			
Name of Employer BCBSNC	Occupation VP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1433.10		

C.

Full Name (Last, First, Middle Initial) Lynn McNeal		Date of Receipt MM / DD / YYYY 08 / 01 / 2008	
Mailing Address 185 Swansea Lane		Transaction ID: SA11AI.69348	
City Chapel Hill	State NC	Zip Code 27516	Amount of Each Receipt this Period 96.16
FEC ID number of contributing federal political committee. C			
Name of Employer BCBSNC	Occupation VP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1529.26		

SUBTOTAL of Receipts This Page (optional)	▶	288.48
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 105 / 200
	<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 North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Lynn McNeal	Date of Receipt MM / DD / YYYY 08 / 15 / 2008
	Mailing Address 185 Swansea Lane	Transaction ID: SA11AI.69522
	City State Zip Code Chapel Hill NC 27516	Amount of Each Receipt this Period 96.16
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation VP Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 1625.42	

B.	Full Name (Last, First, Middle Initial) Lynn McNeal	Date of Receipt MM / DD / YYYY 08 / 29 / 2008
	Mailing Address 185 Swansea Lane	Transaction ID: SA11AI.69697
	City State Zip Code Chapel Hill NC 27516	Amount of Each Receipt this Period 96.16
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation VP Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 1721.58	

C.	Full Name (Last, First, Middle Initial) Lynn McNeal	Date of Receipt MM / DD / YYYY 09 / 12 / 2008
	Mailing Address 185 Swansea Lane	Transaction ID: SA11AI.69872
	City State Zip Code Chapel Hill NC 27516	Amount of Each Receipt this Period 96.16
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation VP Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 1817.74	

SUBTOTAL of Receipts This Page (optional)	288.48
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 106 / 200
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Lynn McNeal	Date of Receipt MM / DD / YYYY 09 / 26 / 2008
	Mailing Address 185 Swansea Lane	Transaction ID: SA11AI.70050
	City State Zip Code Chapel Hill NC 27516	Amount of Each Receipt this Period 96.16
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation VP Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1913.90	

B.	Full Name (Last, First, Middle Initial) Shirley Michl	Date of Receipt MM / DD / YYYY 07 / 03 / 2008
	Mailing Address 105 Songbird Lane	Transaction ID: SA11AI.68936
	City State Zip Code Chapel Hill NC 27514	Amount of Each Receipt this Period 18.67
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation Sr. OD Consultant Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 258.68	

C.	Full Name (Last, First, Middle Initial) Shirley Michl	Date of Receipt MM / DD / YYYY 07 / 18 / 2008
	Mailing Address 105 Songbird Lane	Transaction ID: SA11AI.69106
	City State Zip Code Chapel Hill NC 27514	Amount of Each Receipt this Period 18.67
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation Sr. OD Consultant Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 277.35	

SUBTOTAL of Receipts This Page (optional)	133.50
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 107 / 200
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Shirley Michl		Date of Receipt
	Mailing Address 105 Songbird Lane		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 0 8 / 0 1 / 2 0 0 8
	City	State	Zip Code
	Chapel Hill	NC	27514
	FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>
Name of Employer BCBSNC		Occupation Sr. OD Consultant	Transaction ID: SA11AI.69350
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text"/> 296.02	<input type="text"/> 18.67

B.	Full Name (Last, First, Middle Initial) Shirley Michl		Date of Receipt
	Mailing Address 105 Songbird Lane		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 0 8 / 1 5 / 2 0 0 8
	City	State	Zip Code
	Chapel Hill	NC	27514
	FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>
Name of Employer BCBSNC		Occupation Sr. OD Consultant	Transaction ID: SA11AI.69524
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text"/> 314.69	<input type="text"/> 18.67

C.	Full Name (Last, First, Middle Initial) Shirley Michl		Date of Receipt
	Mailing Address 105 Songbird Lane		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 0 8 / 2 9 / 2 0 0 8
	City	State	Zip Code
	Chapel Hill	NC	27514
	FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>
Name of Employer BCBSNC		Occupation Sr. OD Consultant	Transaction ID: SA11AI.69699
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text"/> 333.36	<input type="text"/> 18.67

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 56.01
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 108 / 200
(check only one)

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

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial) Shirley Michl		Date of Receipt MM / DD / YYYY 09 / 12 / 2008
Mailing Address 105 Songbird Lane		Transaction ID: SA11AI.69874
City Chapel Hill	State NC	Zip Code 27514
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 18.67
Name of Employer BCBSNC	Occupation Sr. OD Consultant	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 352.03	

B.

Full Name (Last, First, Middle Initial) Shirley Michl		Date of Receipt MM / DD / YYYY 09 / 26 / 2008
Mailing Address 105 Songbird Lane		Transaction ID: SA11AI.70052
City Chapel Hill	State NC	Zip Code 27514
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 18.67
Name of Employer BCBSNC	Occupation Sr. OD Consultant	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 370.70	

C.

Full Name (Last, First, Middle Initial) Kathryn Millican		Date of Receipt MM / DD / YYYY 07 / 03 / 2008
Mailing Address 1632 Lorraine Road		Transaction ID: SA11AI.68937
City Raleigh	State NC	Zip Code 27607
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 18.99
Name of Employer BCBSNC	Occupation Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 252.90	

SUBTOTAL of Receipts This Page (optional)	56.33
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 109 / 200
(check only one)

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

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Kathryn Millican		Date of Receipt MM / DD / YYYY 07 / 18 / 2008		
	Mailing Address 1632 Lorraine Road		Transaction ID: SA11AI.69107		
	City Raleigh	State NC	Zip Code 27607	Amount of Each Receipt this Period 18.99	
	FEC ID number of contributing federal political committee. C				
	Name of Employer BCBSNC	Occupation Manager			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 271.89			

B.	Full Name (Last, First, Middle Initial) Kathryn Millican		Date of Receipt MM / DD / YYYY 08 / 01 / 2008		
	Mailing Address 1632 Lorraine Road		Transaction ID: SA11AI.69351		
	City Raleigh	State NC	Zip Code 27607	Amount of Each Receipt this Period 18.99	
	FEC ID number of contributing federal political committee. C				
	Name of Employer BCBSNC	Occupation Manager			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 290.88			

C.	Full Name (Last, First, Middle Initial) Kathryn Millican		Date of Receipt MM / DD / YYYY 08 / 15 / 2008		
	Mailing Address 1632 Lorraine Road		Transaction ID: SA11AI.69525		
	City Raleigh	State NC	Zip Code 27607	Amount of Each Receipt this Period 18.99	
	FEC ID number of contributing federal political committee. C				
	Name of Employer BCBSNC	Occupation Manager			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 309.87			

SUBTOTAL of Receipts This Page (optional)	▶	56.97
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 110 / 200
(check only one)

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

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial) Kathryn Millican		Date of Receipt MM / DD / YYYY 08 / 29 / 2008
Mailing Address 1632 Lorraine Road		Transaction ID: SA11AI.69700
City Raleigh	State NC	Zip Code 27607
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 18.99
Name of Employer BCBSNC	Occupation Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 328.86	

B.

Full Name (Last, First, Middle Initial) Kathryn Millican		Date of Receipt MM / DD / YYYY 09 / 12 / 2008
Mailing Address 1632 Lorraine Road		Transaction ID: SA11AI.69875
City Raleigh	State NC	Zip Code 27607
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 18.99
Name of Employer BCBSNC	Occupation Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 347.85	

C.

Full Name (Last, First, Middle Initial) Kathryn Millican		Date of Receipt MM / DD / YYYY 09 / 26 / 2008
Mailing Address 1632 Lorraine Road		Transaction ID: SA11AI.70053
City Raleigh	State NC	Zip Code 27607
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 18.99
Name of Employer BCBSNC	Occupation Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 366.84	

SUBTOTAL of Receipts This Page (optional)	56.97
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 111 / 200
	<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 North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) J Heidi Musser		Date of Receipt MM / DD / YYYY 07 / 03 / 2008		
	Mailing Address 104 Academy Rove Dr.		Transaction ID: SA11AI.68940		
	City Durham	State NC	Zip Code 27705	Amount of Each Receipt this Period 99.04	
	FEC ID number of contributing federal political committee. C				
	Name of Employer BCBSNC	Occupation VP	Aggregate Year-to-Date 964.82		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

B.	Full Name (Last, First, Middle Initial) J Heidi Musser		Date of Receipt MM / DD / YYYY 07 / 18 / 2008		
	Mailing Address 104 Academy Rove Dr.		Transaction ID: SA11AI.69110		
	City Durham	State NC	Zip Code 27705	Amount of Each Receipt this Period 99.04	
	FEC ID number of contributing federal political committee. C				
	Name of Employer BCBSNC	Occupation VP	Aggregate Year-to-Date 1063.86		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

C.	Full Name (Last, First, Middle Initial) J Heidi Musser		Date of Receipt MM / DD / YYYY 08 / 01 / 2008		
	Mailing Address 104 Academy Rove Dr.		Transaction ID: SA11AI.69354		
	City Durham	State NC	Zip Code 27705	Amount of Each Receipt this Period 99.04	
	FEC ID number of contributing federal political committee. C				
	Name of Employer BCBSNC	Occupation VP	Aggregate Year-to-Date 1162.90		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

SUBTOTAL of Receipts This Page (optional)	▶	297.12
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 112 / 200
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. Full Name (Last, First, Middle Initial)
J Heidi Musser

Mailing Address 104 Academy Rove Dr.

City State Zip Code
Durham NC 27705

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

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1261.94

Date of Receipt
MM / DD / YYYY
08 / 15 / 2008

Transaction ID: SA11AI.69528

Amount of Each Receipt this Period
99.04

B. Full Name (Last, First, Middle Initial)
J Heidi Musser

Mailing Address 104 Academy Rove Dr.

City State Zip Code
Durham NC 27705

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

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1360.98

Date of Receipt
MM / DD / YYYY
08 / 29 / 2008

Transaction ID: SA11AI.69703

Amount of Each Receipt this Period
99.04

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

Mailing Address 104 Academy Rove Dr.

City State Zip Code
Durham NC 27705

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

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1460.02

Date of Receipt
MM / DD / YYYY
09 / 12 / 2008

Transaction ID: SA11AI.69878

Amount of Each Receipt this Period
99.04

SUBTOTAL of Receipts This Page (optional) ► **297.12**

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 113 / 200
(check only one)

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

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. Full Name (Last, First, Middle Initial)
J Heidi Musser

Mailing Address 104 Academy Rove Dr.

City State Zip Code
Durham NC 27705

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

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1559.06

Date of Receipt
M M / D D / Y Y Y Y
09 / 26 / 2008

Transaction ID: SA11AI.70056

Amount of Each Receipt this Period
99.04

B. Full Name (Last, First, Middle Initial)
Ms Linda Norwood

Mailing Address 1131 Fleming Road

City State Zip Code
Creedmoor NC 27522

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

Name of Employer BCBSNC Occupation Supervisor

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.42

Date of Receipt
M M / D D / Y Y Y Y
08 / 29 / 2008

Transaction ID: SA11AI.69705

Amount of Each Receipt this Period
11.69

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

Mailing Address 1131 Fleming Road

City State Zip Code
Creedmoor NC 27522

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

Name of Employer BCBSNC Occupation Supervisor

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
222.11

Date of Receipt
M M / D D / Y Y Y Y
09 / 12 / 2008

Transaction ID: SA11AI.69880

Amount of Each Receipt this Period
11.69

SUBTOTAL of Receipts This Page (optional) ► **122.42**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 114 / 200
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Ms Linda Norwood	Date of Receipt MM / DD / YYYY 09 / 26 / 2008
	Mailing Address 1131 Fleming Road	Transaction ID: SA11AI.70058
	City State Zip Code Creedmoor NC 27522	Amount of Each Receipt this Period 11.69
	FEC ID number of contributing federal political committee. C	
Name of Employer BCBSNC	Occupation Supervisor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 233.80	

B.	Full Name (Last, First, Middle Initial) Maureen OConnor	Date of Receipt MM / DD / YYYY 07 / 03 / 2008
	Mailing Address 104 Beeston Ct.	Transaction ID: SA11AI.68944
	City State Zip Code Morrisville NC 27560	Amount of Each Receipt this Period 192.30
	FEC ID number of contributing federal political committee. C	
Name of Employer BCBSNC	Occupation SVP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2692.20	

C.	Full Name (Last, First, Middle Initial) Maureen OConnor	Date of Receipt MM / DD / YYYY 07 / 18 / 2008
	Mailing Address 104 Beeston Ct.	Transaction ID: SA11AI.69114
	City State Zip Code Morrisville NC 27560	Amount of Each Receipt this Period 192.30
	FEC ID number of contributing federal political committee. C	
Name of Employer BCBSNC	Occupation SVP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2884.50	

SUBTOTAL of Receipts This Page (optional)	396.29
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 115 / 200
	<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 North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Maureen OConnor		Date of Receipt	
	Mailing Address 104 Beeston Ct.		M M / D D / Y Y Y Y Y 0 8 / 0 1 / 2 0 0 8	
	City	State	Zip Code	Transaction ID: SA11AI.69358
	Morrisville	NC	27560	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		192.30	
Name of Employer BCBSNC		Occupation SVP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		3076.80		

B.	Full Name (Last, First, Middle Initial) Maureen OConnor		Date of Receipt	
	Mailing Address 104 Beeston Ct.		M M / D D / Y Y Y Y Y 0 8 / 1 5 / 2 0 0 8	
	City	State	Zip Code	Transaction ID: SA11AI.69532
	Morrisville	NC	27560	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		192.30	
Name of Employer BCBSNC		Occupation SVP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		3269.10		

C.	Full Name (Last, First, Middle Initial) Maureen OConnor		Date of Receipt	
	Mailing Address 104 Beeston Ct.		M M / D D / Y Y Y Y Y 0 8 / 2 9 / 2 0 0 8	
	City	State	Zip Code	Transaction ID: SA11AI.69707
	Morrisville	NC	27560	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		192.30	
Name of Employer BCBSNC		Occupation SVP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		3461.40		

SUBTOTAL of Receipts This Page (optional)	▶	576.90
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 116 / 200
	<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 North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Maureen OConnor		Date of Receipt
	Mailing Address 104 Beeston Ct.		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 09 / 12 / 2008
	City	State	Zip Code
	Morrisville	NC	27560
	FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>
Name of Employer BCBSNC		Occupation SVP	Transaction ID: SA11AI.69882
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text"/> 3653.70	<input type="text"/> 192.30

B.	Full Name (Last, First, Middle Initial) Maureen OConnor		Date of Receipt
	Mailing Address 104 Beeston Ct.		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 09 / 26 / 2008
	City	State	Zip Code
	Morrisville	NC	27560
	FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>
Name of Employer BCBSNC		Occupation SVP	Transaction ID: SA11AI.70060
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text"/> 3846.00	<input type="text"/> 192.30

C.	Full Name (Last, First, Middle Initial) James Owens		Date of Receipt
	Mailing Address 12 Treadway Court		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 07 / 03 / 2008
	City	State	Zip Code
	Hillsborough	NC	27278
	FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>
Name of Employer BCBSNC		Occupation VP	Transaction ID: SA11AI.68946
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text"/> 778.82	<input type="text"/> 28.85

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 413.45
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 117 / 200
(check only one)

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

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 North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial)
James Owens

Mailing Address 12 Treadway Court

City Hillsborough State NC Zip Code 27278

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

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 836.51

Date of Receipt
MM / DD / YYYY
07 / 18 / 2008

Transaction ID: SA11AI.69116

Amount of Each Receipt this Period
57.69

B.

Full Name (Last, First, Middle Initial)
Fara Palumbo

Mailing Address 1000 Gloucester Ct

City Chapel Hill State NC Zip Code 27516

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

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 980.62

Date of Receipt
MM / DD / YYYY
07 / 03 / 2008

Transaction ID: SA11AI.68948

Amount of Each Receipt this Period
72.12

C.

Full Name (Last, First, Middle Initial)
Fara Palumbo

Mailing Address 1000 Gloucester Ct

City Chapel Hill State NC Zip Code 27516

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

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1052.74

Date of Receipt
MM / DD / YYYY
07 / 18 / 2008

Transaction ID: SA11AI.69118

Amount of Each Receipt this Period
72.12

SUBTOTAL of Receipts This Page (optional) ▶ **201.93**

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 118 / 200
(check only one)
 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)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. Full Name (Last, First, Middle Initial)
Fara Palumbo

Mailing Address 1000 Gloucester Ct

City State Zip Code
Chapel Hill NC 27516

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

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1124.86

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

Transaction ID: SA11AI.69361

Amount of Each Receipt this Period
72.12

B. Full Name (Last, First, Middle Initial)
Fara Palumbo

Mailing Address 1000 Gloucester Ct

City State Zip Code
Chapel Hill NC 27516

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

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1196.98

Date of Receipt
M M / D D / Y Y Y Y
0 8 / 1 5 / 2 0 0 8

Transaction ID: SA11AI.69535

Amount of Each Receipt this Period
72.12

C. Full Name (Last, First, Middle Initial)
Fara Palumbo

Mailing Address 1000 Gloucester Ct

City State Zip Code
Chapel Hill NC 27516

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

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1269.10

Date of Receipt
M M / D D / Y Y Y Y
0 8 / 2 9 / 2 0 0 8

Transaction ID: SA11AI.69710

Amount of Each Receipt this Period
72.12

SUBTOTAL of Receipts This Page (optional) ► **216.36**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 119 / 200
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Fara Palumbo		Date of Receipt	
	Mailing Address 1000 Gloucester Ct		M M / D D / Y Y Y Y 09 / 12 / 2008	
	City	State	Zip Code	Transaction ID: SA11AI.69885
	Chapel Hill	NC	27516	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		72.12	
Name of Employer BCBSNC		Occupation VP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		1341.22		

B.	Full Name (Last, First, Middle Initial) Fara Palumbo		Date of Receipt	
	Mailing Address 1000 Gloucester Ct		M M / D D / Y Y Y Y 09 / 26 / 2008	
	City	State	Zip Code	Transaction ID: SA11AI.70063
	Chapel Hill	NC	27516	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		72.12	
Name of Employer BCBSNC		Occupation VP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		1413.34		

C.	Full Name (Last, First, Middle Initial) Michael J Parkerson		Date of Receipt	
	Mailing Address 7504 Clayshant Court		M M / D D / Y Y Y Y 07 / 03 / 2008	
	City	State	Zip Code	Transaction ID: SA11AI.68950
	Wake Forest	NC	27587	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		25.00	
Name of Employer BCBSNC		Occupation VP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		350.00		

SUBTOTAL of Receipts This Page (optional)	▶	169.24
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 120 / 200
(check only one)
 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)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. Full Name (Last, First, Middle Initial)
Michael J Parkerson
Mailing Address 7504 Clayshant Court
City Wake Forest State NC Zip Code 27587
FEC ID number of contributing federal political committee. **C**
Name of Employer BCBSNC Occupation VP
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 375.00
Date of Receipt 07 / 18 / 2008
Transaction ID: SA11AI.69120
Amount of Each Receipt this Period 25.00

B. Full Name (Last, First, Middle Initial)
Michael J Parkerson
Mailing Address 7504 Clayshant Court
City Wake Forest State NC Zip Code 27587
FEC ID number of contributing federal political committee. **C**
Name of Employer BCBSNC Occupation VP
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 400.00
Date of Receipt 08 / 01 / 2008
Transaction ID: SA11AI.69363
Amount of Each Receipt this Period 25.00

C. Full Name (Last, First, Middle Initial)
Michael J Parkerson
Mailing Address 7504 Clayshant Court
City Wake Forest State NC Zip Code 27587
FEC ID number of contributing federal political committee. **C**
Name of Employer BCBSNC Occupation VP
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 425.00
Date of Receipt 08 / 15 / 2008
Transaction ID: SA11AI.69537
Amount of Each Receipt this Period 25.00

SUBTOTAL of Receipts This Page (optional) ► 75.00
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 121 / 200
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. Full Name (Last, First, Middle Initial)
Michael J Parkerson
Mailing Address 7504 Clayshant Court

City State Zip Code
Wake Forest NC 27587

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

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	2	9	/	2	0	0	8

Transaction ID: SA11AI.69712
 Amount of Each Receipt this Period
25.00

B. Full Name (Last, First, Middle Initial)
Michael J Parkerson
Mailing Address 7504 Clayshant Court

City State Zip Code
Wake Forest NC 27587

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

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
475.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	1	2	/	2	0	0	8

Transaction ID: SA11AI.69887
 Amount of Each Receipt this Period
25.00

C. Full Name (Last, First, Middle Initial)
Michael J Parkerson
Mailing Address 7504 Clayshant Court

City State Zip Code
Wake Forest NC 27587

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

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	2	6	/	2	0	0	8

Transaction ID: SA11AI.70065
 Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional) ► **75.00**

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 122 / 200
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

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

Mailing Address 2811 Montcastle Court

City State Zip Code
Durham NC 27705

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

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
560.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	0	3	/	2	0	0	8

Transaction ID: SA11AI.68951

Amount of Each Receipt this Period
40.00

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

Mailing Address 2811 Montcastle Court

City State Zip Code
Durham NC 27705

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

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	1	8	/	2	0	0	8

Transaction ID: SA11AI.69121

Amount of Each Receipt this Period
40.00

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

Mailing Address 2811 Montcastle Court

City State Zip Code
Durham NC 27705

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

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
640.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	0	1	/	2	0	0	8

Transaction ID: SA11AI.69364

Amount of Each Receipt this Period
40.00

SUBTOTAL of Receipts This Page (optional) ► **120.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 123 / 200
(check only one)

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

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial)
M David Patrick

Mailing Address 2811 Montcastle Court

City State Zip Code
Durham NC 27705

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

Name of Employer Occupation
BCBSNC VP

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 680.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 1 5 / 2 0 0 8

Transaction ID: SA11AI.69538

Amount of Each Receipt this Period

40.00

B.

Full Name (Last, First, Middle Initial)
M David Patrick

Mailing Address 2811 Montcastle Court

City State Zip Code
Durham NC 27705

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

Name of Employer Occupation
BCBSNC VP

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 720.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 2 9 / 2 0 0 8

Transaction ID: SA11AI.69713

Amount of Each Receipt this Period

40.00

C.

Full Name (Last, First, Middle Initial)
M David Patrick

Mailing Address 2811 Montcastle Court

City State Zip Code
Durham NC 27705

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

Name of Employer Occupation
BCBSNC VP

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 760.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 2 / 2 0 0 8

Transaction ID: SA11AI.69888

Amount of Each Receipt this Period

40.00

SUBTOTAL of Receipts This Page (optional) ►

120.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 124 / 200
(check only one)

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

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial)
M David Patrick

Mailing Address 2811 Montcastle Court

City State Zip Code
Durham NC 27705

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

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 800.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 26 / 2008

Transaction ID: SA11AI.70066

Amount of Each Receipt this Period
40.00

B.

Full Name (Last, First, Middle Initial)
Gerald Petkau

Mailing Address 402 Troycott Place

City State Zip Code
Cary NC 27519

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

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1530.15

Date of Receipt
M M / D D / Y Y Y Y
07 / 03 / 2008

Transaction ID: SA11AI.68954

Amount of Each Receipt this Period
128.45

C.

Full Name (Last, First, Middle Initial)
Gerald Petkau

Mailing Address 402 Troycott Place

City State Zip Code
Cary NC 27519

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

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1658.60

Date of Receipt
M M / D D / Y Y Y Y
07 / 18 / 2008

Transaction ID: SA11AI.69124

Amount of Each Receipt this Period
128.45

SUBTOTAL of Receipts This Page (optional) ► 296.90

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 125 / 200
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Gerald Petkau		Date of Receipt
	Mailing Address 402 Troycott Place		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 08 / 01 / 2008
	City	State	Zip Code
	Cary	NC	27519
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.69367
Name of Employer BCBSNC		Occupation VP	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 128.45
		<input type="text"/> 1787.05	

B.	Full Name (Last, First, Middle Initial) Gerald Petkau		Date of Receipt
	Mailing Address 402 Troycott Place		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 08 / 15 / 2008
	City	State	Zip Code
	Cary	NC	27519
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.69541
Name of Employer BCBSNC		Occupation VP	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 128.45
		<input type="text"/> 1915.50	

C.	Full Name (Last, First, Middle Initial) Gerald Petkau		Date of Receipt
	Mailing Address 402 Troycott Place		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 08 / 29 / 2008
	City	State	Zip Code
	Cary	NC	27519
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.69716
Name of Employer BCBSNC		Occupation VP	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 128.45
		<input type="text"/> 2043.95	

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 385.35
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 126 / 200
(check only one)

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

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 North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial) Gerald Petkau		Date of Receipt MM / DD / YYYY 09 / 12 / 2008
Mailing Address 402 Troycott Place		Transaction ID: SA11AI.69891
City Cary	State NC	Zip Code 27519
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 128.45
Name of Employer BCBSNC	Occupation VP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2172.40	

B.

Full Name (Last, First, Middle Initial) Gerald Petkau		Date of Receipt MM / DD / YYYY 09 / 26 / 2008
Mailing Address 402 Troycott Place		Transaction ID: SA11AI.70069
City Cary	State NC	Zip Code 27519
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 128.45
Name of Employer BCBSNC	Occupation VP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2300.85	

C.

Full Name (Last, First, Middle Initial) Jocelyn Pickett		Date of Receipt MM / DD / YYYY 07 / 03 / 2008
Mailing Address 203 Chancellor's Ridge		Transaction ID: SA11AI.68957
City Durham	State NC	Zip Code 27713
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 29.77
Name of Employer BCBSNC	Occupation Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 416.78	

SUBTOTAL of Receipts This Page (optional)	286.67
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 127 / 200
(check only one)

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

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial) Jocelyn Pickett		Date of Receipt MM / DD / YYYY 07 / 18 / 2008
Mailing Address 203 Chancellor's Ridge		Transaction ID: SA11AI.69127
City Durham	State NC	Zip Code 27713
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 29.77
Name of Employer BCBSNC	Occupation Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 446.55	

B.

Full Name (Last, First, Middle Initial) Jocelyn Pickett		Date of Receipt MM / DD / YYYY 08 / 01 / 2008
Mailing Address 203 Chancellor's Ridge		Transaction ID: SA11AI.69370
City Durham	State NC	Zip Code 27713
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 29.77
Name of Employer BCBSNC	Occupation Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 476.32	

C.

Full Name (Last, First, Middle Initial) Jocelyn Pickett		Date of Receipt MM / DD / YYYY 08 / 15 / 2008
Mailing Address 203 Chancellor's Ridge		Transaction ID: SA11AI.69544
City Durham	State NC	Zip Code 27713
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 29.77
Name of Employer BCBSNC	Occupation Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 506.09	

SUBTOTAL of Receipts This Page (optional)	▶	89.31
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER: PAGE 128 / 200
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. Full Name (Last, First, Middle Initial)
Jocelyn Pickett
 Mailing Address 203 Chancellor's Ridge
 City State Zip Code
Durham NC 27713
 FEC ID number of contributing federal political committee. **C**
 Name of Employer BCBSNC Occupation Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 535.86
 Date of Receipt M M / D D / Y Y Y Y Y
0 8 / 2 9 / 2 0 0 8
Transaction ID: SA11AI.69719
 Amount of Each Receipt this Period 29.77

B. Full Name (Last, First, Middle Initial)
Jocelyn Pickett
 Mailing Address 203 Chancellor's Ridge
 City State Zip Code
Durham NC 27713
 FEC ID number of contributing federal political committee. **C**
 Name of Employer BCBSNC Occupation Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 565.63
 Date of Receipt M M / D D / Y Y Y Y Y
0 9 / 1 2 / 2 0 0 8
Transaction ID: SA11AI.69894
 Amount of Each Receipt this Period 29.77

C. Full Name (Last, First, Middle Initial)
Jocelyn Pickett
 Mailing Address 203 Chancellor's Ridge
 City State Zip Code
Durham NC 27713
 FEC ID number of contributing federal political committee. **C**
 Name of Employer BCBSNC Occupation Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 595.40
 Date of Receipt M M / D D / Y Y Y Y Y
0 9 / 2 6 / 2 0 0 8
Transaction ID: SA11AI.70072
 Amount of Each Receipt this Period 29.77

SUBTOTAL of Receipts This Page (optional) ► 89.31
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 129 / 200
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial) A Tracy Pickett		Date of Receipt MM / DD / YYYY 07 / 03 / 2008
Mailing Address 4123 Brenmar's Lane		Transaction ID: SA11AI.68958
City Durham	State NC	Zip Code 27713
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 14.85
Name of Employer BCBSNC	Occupation Sr. System Test Specialist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 205.05	

B.

Full Name (Last, First, Middle Initial) A Tracy Pickett		Date of Receipt MM / DD / YYYY 07 / 18 / 2008
Mailing Address 4123 Brenmar's Lane		Transaction ID: SA11AI.69128
City Durham	State NC	Zip Code 27713
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 14.85
Name of Employer BCBSNC	Occupation Sr. System Test Specialist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 219.90	

C.

Full Name (Last, First, Middle Initial) A Tracy Pickett		Date of Receipt MM / DD / YYYY 08 / 01 / 2008
Mailing Address 4123 Brenmar's Lane		Transaction ID: SA11AI.69371
City Durham	State NC	Zip Code 27713
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 14.85
Name of Employer BCBSNC	Occupation Sr. System Test Specialist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 234.75	

SUBTOTAL of Receipts This Page (optional)	44.55
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 130 / 200
(check only one)

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

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

A Tracy Pickett

Mailing Address 4123 Brenmar's Lane

City State Zip Code
Durham NC 27713

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

Name of Employer Occupation
BCBSNC Sr. System Test Specialist

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 249.60

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 1 5 / 2 0 0 8

Transaction ID: SA11AI.69545

Amount of Each Receipt this Period

14.85

B.

Full Name (Last, First, Middle Initial)

A Tracy Pickett

Mailing Address 4123 Brenmar's Lane

City State Zip Code
Durham NC 27713

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

Name of Employer Occupation
BCBSNC Sr. System Test Specialist

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 264.45

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 2 9 / 2 0 0 8

Transaction ID: SA11AI.69720

Amount of Each Receipt this Period

14.85

C.

Full Name (Last, First, Middle Initial)

A Tracy Pickett

Mailing Address 4123 Brenmar's Lane

City State Zip Code
Durham NC 27713

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

Name of Employer Occupation
BCBSNC Sr. System Test Specialist

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 279.30

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 2 / 2 0 0 8

Transaction ID: SA11AI.69895

Amount of Each Receipt this Period

14.85

SUBTOTAL of Receipts This Page (optional)

44.55

TOTAL This Period (last page this line number only)

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 131 / 200
	<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 North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) A Tracy Pickett		Date of Receipt M M / D D / Y Y Y Y 09 / 26 / 2008		
	Mailing Address 4123 Brenmar's Lane		Transaction ID: SA11AI.70073		
	City Durham	State NC	Zip Code 27713	Amount of Each Receipt this Period 14.85	
	FEC ID number of contributing federal political committee. C				
	Name of Employer BCBSNC	Occupation Sr. System Test Specialist			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 294.15			

B.	Full Name (Last, First, Middle Initial) K Nathan Prather		Date of Receipt M M / D D / Y Y Y Y 07 / 03 / 2008		
	Mailing Address 319 Montibello Drive		Transaction ID: SA11AI.68961		
	City Cary	State NC	Zip Code 27513	Amount of Each Receipt this Period 30.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer BCBSNC	Occupation VP			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 420.00			

C.	Full Name (Last, First, Middle Initial) K Nathan Prather		Date of Receipt M M / D D / Y Y Y Y 07 / 18 / 2008		
	Mailing Address 319 Montibello Drive		Transaction ID: SA11AI.69131		
	City Cary	State NC	Zip Code 27513	Amount of Each Receipt this Period 30.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer BCBSNC	Occupation VP			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 450.00			

SUBTOTAL of Receipts This Page (optional)	▶	74.85
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 132 / 200

(check only one)

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

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NAME OF COMMITTEE (In Full)

Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

K Nathan Prather

Mailing Address 319 Montibello Drive

City State Zip Code
Cary NC 27513

FEC ID number of contributing federal political committee.

C

Name of Employer
BCBSNC

Occupation
VP

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.69374

Amount of Each Receipt this Period

30.00

B.

Full Name (Last, First, Middle Initial)

K Nathan Prather

Mailing Address 319 Montibello Drive

City State Zip Code
Cary NC 27513

FEC ID number of contributing federal political committee.

C

Name of Employer
BCBSNC

Occupation
VP

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

510.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 1 5 / 2 0 0 8

Transaction ID: SA11AI.69548

Amount of Each Receipt this Period

30.00

C.

Full Name (Last, First, Middle Initial)

K Nathan Prather

Mailing Address 319 Montibello Drive

City State Zip Code
Cary NC 27513

FEC ID number of contributing federal political committee.

C

Name of Employer
BCBSNC

Occupation
VP

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

540.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 2 9 / 2 0 0 8

Transaction ID: SA11AI.69723

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

90.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 133 / 200
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial)
K Nathan Prather

Mailing Address 319 Montibello Drive

City Cary State NC Zip Code 27513

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

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 570.00

Date of Receipt: 09 / 12 / 2008
Transaction ID: SA11AI.69898
 Amount of Each Receipt this Period: 30.00

B.

Full Name (Last, First, Middle Initial)
K Nathan Prather

Mailing Address 319 Montibello Drive

City Cary State NC Zip Code 27513

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

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt: 09 / 26 / 2008
Transaction ID: SA11AI.70076
 Amount of Each Receipt this Period: 30.00

C.

Full Name (Last, First, Middle Initial)
Paul Reeves

Mailing Address 236 Coachlight Trail

City Burlington State NC Zip Code 27215

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

Name of Employer BCBSNC Occupation Project Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 407.49

Date of Receipt: 07 / 03 / 2008
Transaction ID: SA11AI.68964
 Amount of Each Receipt this Period: 29.56

SUBTOTAL of Receipts This Page (optional) ► 89.56

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 134 / 200
	<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 North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Paul Reeves		Date of Receipt	
	Mailing Address 236 Coachlight Trail		M M / D D / Y Y Y Y Y 07 / 18 / 2008	
	City	State	Zip Code	Transaction ID: SA11AI.69134
	Burlington	NC	27215	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		29.56	
Name of Employer BCBSNC		Occupation Project Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 437.05		

B.	Full Name (Last, First, Middle Initial) Paul Reeves		Date of Receipt	
	Mailing Address 236 Coachlight Trail		M M / D D / Y Y Y Y Y 08 / 01 / 2008	
	City	State	Zip Code	Transaction ID: SA11AI.69379
	Burlington	NC	27215	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		29.56	
Name of Employer BCBSNC		Occupation Project Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 466.61		

C.	Full Name (Last, First, Middle Initial) Paul Reeves		Date of Receipt	
	Mailing Address 236 Coachlight Trail		M M / D D / Y Y Y Y Y 08 / 15 / 2008	
	City	State	Zip Code	Transaction ID: SA11AI.69552
	Burlington	NC	27215	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		29.56	
Name of Employer BCBSNC		Occupation Project Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 496.17		

SUBTOTAL of Receipts This Page (optional)	▶	88.68
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 135 / 200
	<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 North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Paul Reeves		Date of Receipt	
	Mailing Address 236 Coachlight Trail		M M / D D / Y Y Y Y Y 0 8 / 2 9 / 2 0 0 8	
	City	State	Zip Code	Transaction ID: SA11AI.69727
	Burlington	NC	27215	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		29.56	
Name of Employer BCBSNC		Occupation Project Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 525.73		

B.	Full Name (Last, First, Middle Initial) Paul Reeves		Date of Receipt	
	Mailing Address 236 Coachlight Trail		M M / D D / Y Y Y Y Y 0 9 / 1 2 / 2 0 0 8	
	City	State	Zip Code	Transaction ID: SA11AI.69902
	Burlington	NC	27215	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		29.56	
Name of Employer BCBSNC		Occupation Project Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 555.29		

C.	Full Name (Last, First, Middle Initial) Paul Reeves		Date of Receipt	
	Mailing Address 236 Coachlight Trail		M M / D D / Y Y Y Y Y 0 9 / 2 6 / 2 0 0 8	
	City	State	Zip Code	Transaction ID: SA11AI.70080
	Burlington	NC	27215	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		29.56	
Name of Employer BCBSNC		Occupation Project Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 584.85		

SUBTOTAL of Receipts This Page (optional)	▶	88.68
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 136 / 200
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. Full Name (Last, First, Middle Initial)
Mr. Harry Reynolds, Jr.
Mailing Address 1201 Summerville Lane

City State Zip Code
Durham NC 27712

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

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1119.76

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	0	3	/	2	0	0	8

Transaction ID: SA11AI.68965
 Amount of Each Receipt this Period
81.04

B. Full Name (Last, First, Middle Initial)
Mr. Harry Reynolds, Jr.
Mailing Address 1201 Summerville Lane

City State Zip Code
Durham NC 27712

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

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1200.80

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	1	8	/	2	0	0	8

Transaction ID: SA11AI.69135
 Amount of Each Receipt this Period
81.04

C. Full Name (Last, First, Middle Initial)
Mr. Harry Reynolds, Jr.
Mailing Address 1201 Summerville Lane

City State Zip Code
Durham NC 27712

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

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1281.84

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	0	1	/	2	0	0	8

Transaction ID: SA11AI.69380
 Amount of Each Receipt this Period
81.04

SUBTOTAL of Receipts This Page (optional) ► **243.12**

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 137 / 200
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Mr. Harry Reynolds, Jr.

Mailing Address 1201 Summerville Lane

City State Zip Code
Durham NC 27712

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

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1362.88

Date of Receipt
M M / D D / Y Y Y Y Y
0 8 / 1 5 / 2 0 0 8

Transaction ID: SA11AI.69553

Amount of Each Receipt this Period
81.04

B.

Full Name (Last, First, Middle Initial)
Mr. Harry Reynolds, Jr.

Mailing Address 1201 Summerville Lane

City State Zip Code
Durham NC 27712

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

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1427.72

Date of Receipt
M M / D D / Y Y Y Y Y
0 8 / 2 9 / 2 0 0 8

Transaction ID: SA11AI.69728

Amount of Each Receipt this Period
64.84

C.

Full Name (Last, First, Middle Initial)
Mr. Harry Reynolds, Jr.

Mailing Address 1201 Summerville Lane

City State Zip Code
Durham NC 27712

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

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1508.76

Date of Receipt
M M / D D / Y Y Y Y Y
0 9 / 1 2 / 2 0 0 8

Transaction ID: SA11AI.69903

Amount of Each Receipt this Period
81.04

SUBTOTAL of Receipts This Page (optional) ► 226.92

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 138 / 200

(check only one)

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

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NAME OF COMMITTEE (In Full)

Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Harry Reynolds, Jr.

Mailing Address 1201 Summerville Lane

City State Zip Code
Durham NC 27712

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

Name of Employer Occupation
BCBSNC VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1589.80

Date of Receipt

M M / D D / Y Y Y Y
09 / 26 / 2008

Transaction ID: SA11AI.70081

Amount of Each Receipt this Period

81.04

B.

Full Name (Last, First, Middle Initial)

Mr. Daniel Risku

Mailing Address 105 San Miguel Place

City State Zip Code
Chapel Hill NC 27514

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

Name of Employer Occupation
BCBSNC VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1414.42

Date of Receipt

M M / D D / Y Y Y Y
07 / 03 / 2008

Transaction ID: SA11AI.68967

Amount of Each Receipt this Period

101.53

C.

Full Name (Last, First, Middle Initial)

Mr. Daniel Risku

Mailing Address 105 San Miguel Place

City State Zip Code
Chapel Hill NC 27514

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

Name of Employer Occupation
BCBSNC VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1515.95

Date of Receipt

M M / D D / Y Y Y Y
07 / 18 / 2008

Transaction ID: SA11AI.69137

Amount of Each Receipt this Period

101.53

SUBTOTAL of Receipts This Page (optional) ▶

284.10

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 139 / 200
(check only one)

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

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 North Carolina Employee Political Action Committee

A. Full Name (Last, First, Middle Initial)
Mr. Daniel Risku

Mailing Address 105 San Miguel Place

City State Zip Code
Chapel Hill NC 27514

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

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1617.48

Date of Receipt
MM / DD / YYYY
08 / 01 / 2008

Transaction ID: SA11AI.69382

Amount of Each Receipt this Period
101.53

B. Full Name (Last, First, Middle Initial)
Mr. Daniel Risku

Mailing Address 105 San Miguel Place

City State Zip Code
Chapel Hill NC 27514

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

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1719.01

Date of Receipt
MM / DD / YYYY
08 / 15 / 2008

Transaction ID: SA11AI.69555

Amount of Each Receipt this Period
101.53

C. Full Name (Last, First, Middle Initial)
Mr. Daniel Risku

Mailing Address 105 San Miguel Place

City State Zip Code
Chapel Hill NC 27514

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

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1820.54

Date of Receipt
MM / DD / YYYY
08 / 29 / 2008

Transaction ID: SA11AI.69730

Amount of Each Receipt this Period
101.53

SUBTOTAL of Receipts This Page (optional) ► **304.59**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 140 / 200
	<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 North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Mr. Daniel Risku	Date of Receipt
	Mailing Address 105 San Miguel Place	<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 09 / 12 / 2008
	City State Zip Code Chapel Hill NC 27514	Transaction ID: SA11AI.69905
	FEC ID number of contributing federal political committee. <input type="text"/> C <input type="text"/>	Amount of Each Receipt this Period <input type="text"/> 101.53
	Name of Employer BCBSNC Occupation VP Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <input type="text"/> 1922.07	

B.	Full Name (Last, First, Middle Initial) Mr. Daniel Risku	Date of Receipt
	Mailing Address 105 San Miguel Place	<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 09 / 26 / 2008
	City State Zip Code Chapel Hill NC 27514	Transaction ID: SA11AI.70083
	FEC ID number of contributing federal political committee. <input type="text"/> C <input type="text"/>	Amount of Each Receipt this Period <input type="text"/> 101.53
	Name of Employer BCBSNC Occupation VP Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <input type="text"/> 2023.60	

C.	Full Name (Last, First, Middle Initial) Mr. Michael Roach	Date of Receipt
	Mailing Address 201 Woodleaf Dr	<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 07 / 03 / 2008
	City State Zip Code Chapel Hill NC 27516	Transaction ID: SA11AI.68968
	FEC ID number of contributing federal political committee. <input type="text"/> C <input type="text"/>	Amount of Each Receipt this Period <input type="text"/> 50.00
	Name of Employer BCBSNC Occupation VP Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <input type="text"/> 700.00	

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 253.06
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 141 / 200
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Mr. John Roos

Mailing Address 119 Draymore Way

City State Zip Code
Morrisville NC 27560

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

Name of Employer BCBSNC Occupation SVP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2692.20

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 03 / 2008

Transaction ID: SA11AI.68969

Amount of Each Receipt this Period
192.30

B.

Full Name (Last, First, Middle Initial)
Mr. John Roos

Mailing Address 119 Draymore Way

City State Zip Code
Morrisville NC 27560

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

Name of Employer BCBSNC Occupation SVP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2884.50

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 18 / 2008

Transaction ID: SA11AI.69138

Amount of Each Receipt this Period
192.30

C.

Full Name (Last, First, Middle Initial)
Mr. John Roos

Mailing Address 119 Draymore Way

City State Zip Code
Morrisville NC 27560

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

Name of Employer BCBSNC Occupation SVP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 3076.80

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 01 / 2008

Transaction ID: SA11AI.69383

Amount of Each Receipt this Period
192.30

SUBTOTAL of Receipts This Page (optional) ► **576.90**

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 142 / 200
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Mr. John Roos

Mailing Address 119 Draymore Way

City State Zip Code
Morrisville NC 27560

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

Name of Employer BCBSNC Occupation SVP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3269.10

Date of Receipt
MM / DD / YYYY
08 / 15 / 2008

Transaction ID: SA11AI.69556

Amount of Each Receipt this Period
192.30

B.

Full Name (Last, First, Middle Initial)
Mr. John Roos

Mailing Address 119 Draymore Way

City State Zip Code
Morrisville NC 27560

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

Name of Employer BCBSNC Occupation SVP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3461.40

Date of Receipt
MM / DD / YYYY
08 / 29 / 2008

Transaction ID: SA11AI.69731

Amount of Each Receipt this Period
192.30

C.

Full Name (Last, First, Middle Initial)
Mr. John Roos

Mailing Address 119 Draymore Way

City State Zip Code
Morrisville NC 27560

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

Name of Employer BCBSNC Occupation SVP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3653.70

Date of Receipt
MM / DD / YYYY
09 / 12 / 2008

Transaction ID: SA11AI.69906

Amount of Each Receipt this Period
192.30

SUBTOTAL of Receipts This Page (optional) ► **576.90**

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 143 / 200
(check only one)

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

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial) Mr. John Roos		Date of Receipt MM / DD / YYYY 09 / 26 / 2008
Mailing Address 119 Draymore Way		Transaction ID: SA11AI.70084
City Morrisville	State NC	Zip Code 27560
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 192.30
Name of Employer BCBSNC	Occupation SVP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3846.00	

B.

Full Name (Last, First, Middle Initial) V Tarsha Rowland		Date of Receipt MM / DD / YYYY 07 / 03 / 2008
Mailing Address 5021 Robinwood Rd		Transaction ID: SA11AI.68970
City Durham	State NC	Zip Code 27713
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 32.68
Name of Employer BCBSNC	Occupation Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 417.67	

C.

Full Name (Last, First, Middle Initial) V Tarsha Rowland		Date of Receipt MM / DD / YYYY 07 / 18 / 2008
Mailing Address 5021 Robinwood Rd		Transaction ID: SA11AI.69139
City Durham	State NC	Zip Code 27713
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 32.68
Name of Employer BCBSNC	Occupation Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.35	

SUBTOTAL of Receipts This Page (optional)	257.66
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 144 / 200
(check only one)

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

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial) V Tarsha Rowland		Date of Receipt MM / DD / YYYY 08 / 01 / 2008
Mailing Address 5021 Robinwood Rd		Transaction ID: SA11AI.69384
City Durham	State NC	Zip Code 27713
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 32.68
Name of Employer BCBSNC	Occupation Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 483.03	

B.

Full Name (Last, First, Middle Initial) V Tarsha Rowland		Date of Receipt MM / DD / YYYY 08 / 15 / 2008
Mailing Address 5021 Robinwood Rd		Transaction ID: SA11AI.69557
City Durham	State NC	Zip Code 27713
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 32.68
Name of Employer BCBSNC	Occupation Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 515.71	

C.

Full Name (Last, First, Middle Initial) V Tarsha Rowland		Date of Receipt MM / DD / YYYY 08 / 29 / 2008
Mailing Address 5021 Robinwood Rd		Transaction ID: SA11AI.69732
City Durham	State NC	Zip Code 27713
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 32.68
Name of Employer BCBSNC	Occupation Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 548.39	

SUBTOTAL of Receipts This Page (optional)	98.04
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 145 / 200
(check only one)

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

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial) V Tarsha Rowland		Date of Receipt MM / DD / YYYY 09 / 12 / 2008
Mailing Address 5021 Robinwood Rd		Transaction ID: SA11AI.69907
City Durham	State NC	Zip Code 27713
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 32.68
Name of Employer BCBSNC	Occupation Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 581.07	

B.

Full Name (Last, First, Middle Initial) V Tarsha Rowland		Date of Receipt MM / DD / YYYY 09 / 26 / 2008
Mailing Address 5021 Robinwood Rd		Transaction ID: SA11AI.70085
City Durham	State NC	Zip Code 27713
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 32.68
Name of Employer BCBSNC	Occupation Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 613.75	

C.

Full Name (Last, First, Middle Initial) Mike Serozi		Date of Receipt MM / DD / YYYY 07 / 03 / 2008
Mailing Address 128 Lochwood Dr. West		Transaction ID: SA11AI.68973
City Cary	State NC	Zip Code 27511
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 45.12
Name of Employer BCBSNC	Occupation Resource/Technical Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 624.48	

SUBTOTAL of Receipts This Page (optional)	110.48
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 146 / 200
(check only one)

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

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Mike Serozi

Mailing Address 128 Lochwood Dr. West

City Cary State NC Zip Code 27511

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

Name of Employer BCBSNC Occupation Resource/Technical Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 669.60

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	1	8	/	2	0	0	8

Transaction ID: SA11AI.69144

Amount of Each Receipt this Period
45.12

B.

Full Name (Last, First, Middle Initial)
Mike Serozi

Mailing Address 128 Lochwood Dr. West

City Cary State NC Zip Code 27511

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

Name of Employer BCBSNC Occupation Resource/Technical Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 714.72

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	0	1	/	2	0	0	8

Transaction ID: SA11AI.69388

Amount of Each Receipt this Period
45.12

C.

Full Name (Last, First, Middle Initial)
Mike Serozi

Mailing Address 128 Lochwood Dr. West

City Cary State NC Zip Code 27511

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

Name of Employer BCBSNC Occupation Resource/Technical Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 759.84

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	1	5	/	2	0	0	8

Transaction ID: SA11AI.69561

Amount of Each Receipt this Period
45.12

SUBTOTAL of Receipts This Page (optional) ► **135.36**

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 147 / 200
(check only one)

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

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial) Mike Serozi		Date of Receipt MM / DD / YYYY 08 / 29 / 2008
Mailing Address 128 Lochwood Dr. West		Transaction ID: SA11AI.69736
City Cary	State NC	Zip Code 27511
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 45.12
Name of Employer BCBSNC	Occupation Resource/Technical Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 804.96	

B.

Full Name (Last, First, Middle Initial) Mike Serozi		Date of Receipt MM / DD / YYYY 09 / 12 / 2008
Mailing Address 128 Lochwood Dr. West		Transaction ID: SA11AI.69913
City Cary	State NC	Zip Code 27511
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 45.12
Name of Employer BCBSNC	Occupation Resource/Technical Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 850.08	

C.

Full Name (Last, First, Middle Initial) Mike Serozi		Date of Receipt MM / DD / YYYY 09 / 26 / 2008
Mailing Address 128 Lochwood Dr. West		Transaction ID: SA11AI.70090
City Cary	State NC	Zip Code 27511
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 45.12
Name of Employer BCBSNC	Occupation Resource/Technical Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 895.20	

SUBTOTAL of Receipts This Page (optional)	135.36
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 148 / 200
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial)
E Ronald Smith

Mailing Address 34 Forked Pine Ct

City State Zip Code
Chapel Hill NC 27517

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

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
941.28

Date of Receipt
MM / DD / YYYY
07 / 03 / 2008

Transaction ID: SA11AI.68975

Amount of Each Receipt this Period
70.77

B.

Full Name (Last, First, Middle Initial)
E Ronald Smith

Mailing Address 34 Forked Pine Ct

City State Zip Code
Chapel Hill NC 27517

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

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1012.05

Date of Receipt
MM / DD / YYYY
07 / 18 / 2008

Transaction ID: SA11AI.69146

Amount of Each Receipt this Period
70.77

C.

Full Name (Last, First, Middle Initial)
E Ronald Smith

Mailing Address 34 Forked Pine Ct

City State Zip Code
Chapel Hill NC 27517

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

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1082.82

Date of Receipt
MM / DD / YYYY
08 / 01 / 2008

Transaction ID: SA11AI.69390

Amount of Each Receipt this Period
70.77

SUBTOTAL of Receipts This Page (optional) ► **212.31**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 149 / 200
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial)
E Ronald Smith

Mailing Address 34 Forked Pine Ct

City State Zip Code
Chapel Hill NC 27517

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

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1153.59

Date of Receipt
MM / DD / YYYY
08 / 15 / 2008

Transaction ID: SA11AI.69563

Amount of Each Receipt this Period
70.77

B.

Full Name (Last, First, Middle Initial)
E Ronald Smith

Mailing Address 34 Forked Pine Ct

City State Zip Code
Chapel Hill NC 27517

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

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1224.36

Date of Receipt
MM / DD / YYYY
08 / 29 / 2008

Transaction ID: SA11AI.69738

Amount of Each Receipt this Period
70.77

C.

Full Name (Last, First, Middle Initial)
E Ronald Smith

Mailing Address 34 Forked Pine Ct

City State Zip Code
Chapel Hill NC 27517

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

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1295.13

Date of Receipt
MM / DD / YYYY
09 / 12 / 2008

Transaction ID: SA11AI.69915

Amount of Each Receipt this Period
70.77

SUBTOTAL of Receipts This Page (optional) ► **212.31**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 150 / 200
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) E Ronald Smith	Date of Receipt MM / DD / YYYY 09 / 26 / 2008
	Mailing Address 34 Forked Pine Ct	Transaction ID: SA11AI.70092
	City State Zip Code Chapel Hill NC 27517	Amount of Each Receipt this Period 70.77
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation VP Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 1365.90	

B.	Full Name (Last, First, Middle Initial) William Smith	Date of Receipt MM / DD / YYYY 07 / 03 / 2008
	Mailing Address 303 Lynden Valley Court	Transaction ID: SA11AI.68977
	City State Zip Code Cary NC 27519	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 280.00	

C.	Full Name (Last, First, Middle Initial) William Smith	Date of Receipt MM / DD / YYYY 07 / 18 / 2008
	Mailing Address 303 Lynden Valley Court	Transaction ID: SA11AI.69148
	City State Zip Code Cary NC 27519	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 300.00	

SUBTOTAL of Receipts This Page (optional)	110.77
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 151 / 200
(check only one)
 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)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. Full Name (Last, First, Middle Initial)
William Smith
 Mailing Address 303 Lynden Valley Court
 City Cary State NC Zip Code 27519
 FEC ID number of contributing federal political committee. **C**
 Name of Employer BCBSNC Occupation Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 320.00
 Date of Receipt 08 / 01 / 2008
Transaction ID: SA11AI.69392
 Amount of Each Receipt this Period 20.00

B. Full Name (Last, First, Middle Initial)
William Smith
 Mailing Address 303 Lynden Valley Court
 City Cary State NC Zip Code 27519
 FEC ID number of contributing federal political committee. **C**
 Name of Employer BCBSNC Occupation Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 340.00
 Date of Receipt 08 / 15 / 2008
Transaction ID: SA11AI.69565
 Amount of Each Receipt this Period 20.00

C. Full Name (Last, First, Middle Initial)
William Smith
 Mailing Address 303 Lynden Valley Court
 City Cary State NC Zip Code 27519
 FEC ID number of contributing federal political committee. **C**
 Name of Employer BCBSNC Occupation Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 360.00
 Date of Receipt 08 / 29 / 2008
Transaction ID: SA11AI.69740
 Amount of Each Receipt this Period 20.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 152 / 200
(check only one)

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

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 North Carolina Employee Political Action Committee

A.

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

Mailing Address 303 Lynden Valley Court

City Cary State NC Zip Code 27519

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

Name of Employer BCBSNC Occupation Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 380.00

Date of Receipt: 09 / 12 / 2008
Transaction ID: SA11AI.69917
Amount of Each Receipt this Period: 20.00

B.

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

Mailing Address 303 Lynden Valley Court

City Cary State NC Zip Code 27519

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

Name of Employer BCBSNC Occupation Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt: 09 / 26 / 2008
Transaction ID: SA11AI.70094
Amount of Each Receipt this Period: 20.00

C.

Full Name (Last, First, Middle Initial)
John Sternbergh

Mailing Address 3726 St. Mark's Road

City Durham * State NC Zip Code 27707

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

Name of Employer BCBSNC Occupation SVP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1815.33

Date of Receipt: 07 / 03 / 2008
Transaction ID: SA11AI.68979
Amount of Each Receipt this Period: 133.48

SUBTOTAL of Receipts This Page (optional) ► 173.48

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 153 / 200
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) John Sternbergh	Date of Receipt MM / DD / YYYY 07 / 18 / 2008
	Mailing Address 3726 St. Mark's Road	Transaction ID: SA11AI.69150
	City State Zip Code Durham * NC 27707	Amount of Each Receipt this Period 133.48
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation SVP Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1948.81	

B.	Full Name (Last, First, Middle Initial) John Sternbergh	Date of Receipt MM / DD / YYYY 08 / 01 / 2008
	Mailing Address 3726 St. Mark's Road	Transaction ID: SA11AI.69394
	City State Zip Code Durham * NC 27707	Amount of Each Receipt this Period 133.48
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation SVP Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 2082.29	

C.	Full Name (Last, First, Middle Initial) John Sternbergh	Date of Receipt MM / DD / YYYY 08 / 15 / 2008
	Mailing Address 3726 St. Mark's Road	Transaction ID: SA11AI.69567
	City State Zip Code Durham * NC 27707	Amount of Each Receipt this Period 133.48
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation SVP Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 2215.77	

SUBTOTAL of Receipts This Page (optional)	400.44
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 154 / 200
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) John Sternbergh	Date of Receipt MM / DD / YYYY 08 / 29 / 2008
	Mailing Address 3726 St. Mark's Road	Transaction ID: SA11AI.69742
	City State Zip Code Durham * NC 27707	Amount of Each Receipt this Period 133.48
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation SVP Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 2349.25	

B.	Full Name (Last, First, Middle Initial) John Sternbergh	Date of Receipt MM / DD / YYYY 09 / 12 / 2008
	Mailing Address 3726 St. Mark's Road	Transaction ID: SA11AI.69919
	City State Zip Code Durham * NC 27707	Amount of Each Receipt this Period 133.48
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation SVP Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 2482.73	

C.	Full Name (Last, First, Middle Initial) John Sternbergh	Date of Receipt MM / DD / YYYY 09 / 26 / 2008
	Mailing Address 3726 St. Mark's Road	Transaction ID: SA11AI.70096
	City State Zip Code Durham * NC 27707	Amount of Each Receipt this Period 133.48
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation SVP Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 2616.21	

SUBTOTAL of Receipts This Page (optional)	400.44
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 155 / 200
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Richard Supinski		Date of Receipt
	Mailing Address 2610 Lochmore Drive		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	Raleigh	NC	27608
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.68986
Name of Employer BCBSNC		Occupation Director	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 30.00
		<input type="text"/> 420.00	

B.	Full Name (Last, First, Middle Initial) Richard Supinski		Date of Receipt
	Mailing Address 2610 Lochmore Drive		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	Raleigh	NC	27608
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.69157
Name of Employer BCBSNC		Occupation Director	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 30.00
		<input type="text"/> 450.00	

C.	Full Name (Last, First, Middle Initial) Richard Supinski		Date of Receipt
	Mailing Address 2610 Lochmore Drive		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	Raleigh	NC	27608
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.69401
Name of Employer BCBSNC		Occupation Director	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 30.00
		<input type="text"/> 480.00	

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 90.00
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 156 / 200
(check only one)

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

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 North Carolina Employee Political Action Committee

A.

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

Mailing Address 2610 Lochmore Drive

City Raleigh State NC Zip Code 27608

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

Name of Employer BCBSNC Occupation Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 510.00

Date of Receipt: 08 / 15 / 2008
Transaction ID: SA11AI.69574
Amount of Each Receipt this Period: 30.00

B.

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

Mailing Address 2610 Lochmore Drive

City Raleigh State NC Zip Code 27608

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

Name of Employer BCBSNC Occupation Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 540.00

Date of Receipt: 08 / 29 / 2008
Transaction ID: SA11AI.69749
Amount of Each Receipt this Period: 30.00

C.

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

Mailing Address 2610 Lochmore Drive

City Raleigh State NC Zip Code 27608

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

Name of Employer BCBSNC Occupation Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 570.00

Date of Receipt: 09 / 12 / 2008
Transaction ID: SA11AI.69926
Amount of Each Receipt this Period: 30.00

SUBTOTAL of Receipts This Page (optional) ► 90.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 157 / 200
	<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 North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Richard Supinski	Date of Receipt M M / D D / Y Y Y Y Y 09 / 26 / 2008
	Mailing Address 2610 Lochmore Drive	Transaction ID: SA11AI.70103
	City Raleigh State NC Zip Code 27608	Amount of Each Receipt this Period 30.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 600.00	

B.	Full Name (Last, First, Middle Initial) Mrs. Carol Sutton	Date of Receipt M M / D D / Y Y Y Y Y 07 / 03 / 2008
	Mailing Address 22101 Spring Meadow Dr.	Transaction ID: SA11AI.68987
	City Chapel Hill State NC Zip Code 27514	Amount of Each Receipt this Period 52.07
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation VP Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 721.38	

C.	Full Name (Last, First, Middle Initial) Mrs. Carol Sutton	Date of Receipt M M / D D / Y Y Y Y Y 07 / 18 / 2008
	Mailing Address 22101 Spring Meadow Dr.	Transaction ID: SA11AI.69158
	City Chapel Hill State NC Zip Code 27514	Amount of Each Receipt this Period 52.07
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation VP Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 773.45	

SUBTOTAL of Receipts This Page (optional)	134.14
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 158 / 200
(check only one)

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

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 North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Mrs. Carol Sutton

Mailing Address 22101 Spring Meadow Dr.

City State Zip Code
Chapel Hill NC 27514

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

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
825.52

Date of Receipt
MM / DD / YYYY
08 / 01 / 2008

Transaction ID: SA11AI.69402

Amount of Each Receipt this Period
52.07

B.

Full Name (Last, First, Middle Initial)
Mrs. Carol Sutton

Mailing Address 22101 Spring Meadow Dr.

City State Zip Code
Chapel Hill NC 27514

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

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
877.59

Date of Receipt
MM / DD / YYYY
08 / 15 / 2008

Transaction ID: SA11AI.69575

Amount of Each Receipt this Period
52.07

C.

Full Name (Last, First, Middle Initial)
Mrs. Carol Sutton

Mailing Address 22101 Spring Meadow Dr.

City State Zip Code
Chapel Hill NC 27514

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

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
929.66

Date of Receipt
MM / DD / YYYY
08 / 29 / 2008

Transaction ID: SA11AI.69750

Amount of Each Receipt this Period
52.07

SUBTOTAL of Receipts This Page (optional) ► **156.21**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 159 / 200
	<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 North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Mrs. Carol Sutton		Date of Receipt MM / DD / YYYY 09 / 12 / 2008		
	Mailing Address 22101 Spring Meadow Dr.		Transaction ID: SA11AI.69927		
	City Chapel Hill	State NC	Zip Code 27514	Amount of Each Receipt this Period 52.07	
	FEC ID number of contributing federal political committee. C				
	Name of Employer BCBSNC	Occupation VP	Aggregate Year-to-Date 981.73		

B.	Full Name (Last, First, Middle Initial) Mrs. Carol Sutton		Date of Receipt MM / DD / YYYY 09 / 26 / 2008		
	Mailing Address 22101 Spring Meadow Dr.		Transaction ID: SA11AI.70104		
	City Chapel Hill	State NC	Zip Code 27514	Amount of Each Receipt this Period 52.07	
	FEC ID number of contributing federal political committee. C				
	Name of Employer BCBSNC	Occupation VP	Aggregate Year-to-Date 1033.80		

C.	Full Name (Last, First, Middle Initial) Robert Vavrina		Date of Receipt MM / DD / YYYY 07 / 03 / 2008		
	Mailing Address 315 Northcreek Dr.		Transaction ID: SA11AI.68991		
	City Durham	State NC	Zip Code 27707	Amount of Each Receipt this Period 100.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer BCBSNC	Occupation SVP	Aggregate Year-to-Date 1400.00		

SUBTOTAL of Receipts This Page (optional)	▶	204.14
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER: PAGE 160 / 200
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. Full Name (Last, First, Middle Initial)
Robert Vavrina
Mailing Address 315 Northcreek Dr.
City Durham State NC Zip Code 27707
FEC ID number of contributing federal political committee. **C**
Name of Employer BCBSNC Occupation SVP
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1500.00
Date of Receipt MM / DD / YYYY 07 / 18 / 2008
Transaction ID: SA11AI.69161
Amount of Each Receipt this Period 100.00

B. Full Name (Last, First, Middle Initial)
Robert Vavrina
Mailing Address 315 Northcreek Dr.
City Durham State NC Zip Code 27707
FEC ID number of contributing federal political committee. **C**
Name of Employer BCBSNC Occupation SVP
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1600.00
Date of Receipt MM / DD / YYYY 08 / 01 / 2008
Transaction ID: SA11AI.69405
Amount of Each Receipt this Period 100.00

C. Full Name (Last, First, Middle Initial)
Robert Vavrina
Mailing Address 315 Northcreek Dr.
City Durham State NC Zip Code 27707
FEC ID number of contributing federal political committee. **C**
Name of Employer BCBSNC Occupation SVP
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1600.00
Date of Receipt MM / DD / YYYY 08 / 15 / 2008
Transaction ID: SA11AI.69578
Amount of Each Receipt this Period 0.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 161 / 200
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Jeanne Wallander		Date of Receipt
	Mailing Address 3404 Bluet Ct		<input type="text" value="07"/> / <input type="text" value="03"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Holly Springs	NC	27540
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer BCBSNC		Occupation VP	Transaction ID: SA11AI.68994
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="440.00"/>	<input type="text" value="40.00"/>

B.	Full Name (Last, First, Middle Initial) Jeanne Wallander		Date of Receipt
	Mailing Address 3404 Bluet Ct		<input type="text" value="07"/> / <input type="text" value="18"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Holly Springs	NC	27540
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer BCBSNC		Occupation VP	Transaction ID: SA11AI.69164
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="480.00"/>	<input type="text" value="40.00"/>

C.	Full Name (Last, First, Middle Initial) Jeanne Wallander		Date of Receipt
	Mailing Address 3404 Bluet Ct		<input type="text" value="08"/> / <input type="text" value="01"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Holly Springs	NC	27540
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer BCBSNC		Occupation VP	Transaction ID: SA11AI.69408
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="520.00"/>	<input type="text" value="40.00"/>

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 162 / 200
(check only one)

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

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Jeanne Wallander

Mailing Address 3404 Bluet Ct

City State Zip Code
Holly Springs NC 27540

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

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
560.00

Date of Receipt
MM / DD / YYYY
08 / 15 / 2008

Transaction ID: SA11AI.69581

Amount of Each Receipt this Period
40.00

B.

Full Name (Last, First, Middle Initial)
Jeanne Wallander

Mailing Address 3404 Bluet Ct

City State Zip Code
Holly Springs NC 27540

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

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt
MM / DD / YYYY
08 / 29 / 2008

Transaction ID: SA11AI.69757

Amount of Each Receipt this Period
40.00

C.

Full Name (Last, First, Middle Initial)
Jeanne Wallander

Mailing Address 3404 Bluet Ct

City State Zip Code
Holly Springs NC 27540

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

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
640.00

Date of Receipt
MM / DD / YYYY
09 / 12 / 2008

Transaction ID: SA11AI.69933

Amount of Each Receipt this Period
40.00

SUBTOTAL of Receipts This Page (optional) ► **120.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 163 / 200
(check only one)

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

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. Full Name (Last, First, Middle Initial)
Jeanne Wallander

Mailing Address 3404 Bluet Ct

City Holly Springs State NC Zip Code 27540

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

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 680.00

Date of Receipt: 09 / 26 / 2008
Transaction ID: SA11AI.70110
 Amount of Each Receipt this Period: 40.00

B. Full Name (Last, First, Middle Initial)
Jason Weinstein

Mailing Address 1604 Foreman Street

City Hillsborough State NC Zip Code 27278

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

Name of Employer BCBSNC Occupation Resource Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 360.27

Date of Receipt: 07 / 03 / 2008
Transaction ID: SA11AI.68997
 Amount of Each Receipt this Period: 26.29

C. Full Name (Last, First, Middle Initial)
Jason Weinstein

Mailing Address 1604 Foreman Street

City Hillsborough State NC Zip Code 27278

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

Name of Employer BCBSNC Occupation Resource Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 386.56

Date of Receipt: 07 / 18 / 2008
Transaction ID: SA11AI.69167
 Amount of Each Receipt this Period: 26.29

SUBTOTAL of Receipts This Page (optional) ► 92.58

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 164 / 200
	<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 North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Jason Weinstein	Date of Receipt MM / DD / YYYY 08 / 01 / 2008
	Mailing Address 1604 Foreman Street	Transaction ID: SA11AI.69411
	City Hillsborough State NC Zip Code 27278	Amount of Each Receipt this Period 26.29
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation Resource Manager Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 412.85	

B.	Full Name (Last, First, Middle Initial) Jason Weinstein	Date of Receipt MM / DD / YYYY 08 / 15 / 2008
	Mailing Address 1604 Foreman Street	Transaction ID: SA11AI.69584
	City Hillsborough State NC Zip Code 27278	Amount of Each Receipt this Period 26.29
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation Resource Manager Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 439.14	

C.	Full Name (Last, First, Middle Initial) Jason Weinstein	Date of Receipt MM / DD / YYYY 08 / 29 / 2008
	Mailing Address 1604 Foreman Street	Transaction ID: SA11AI.69760
	City Hillsborough State NC Zip Code 27278	Amount of Each Receipt this Period 26.29
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation Resource Manager Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 465.43	

SUBTOTAL of Receipts This Page (optional)	78.87
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 165 / 200
(check only one)

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

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Jason Weinstein

Mailing Address 1604 Foreman Street

City Hillsborough State NC Zip Code 27278

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

Name of Employer BCBSNC Occupation Resource Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 491.72

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	1	2	/	2	0	0	8

Transaction ID: SA11AI.69936

Amount of Each Receipt this Period 26.29

B.

Full Name (Last, First, Middle Initial)
Jason Weinstein

Mailing Address 1604 Foreman Street

City Hillsborough State NC Zip Code 27278

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

Name of Employer BCBSNC Occupation Resource Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 518.01

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	2	6	/	2	0	0	8

Transaction ID: SA11AI.70113

Amount of Each Receipt this Period 26.29

C.

Full Name (Last, First, Middle Initial)
Jeffrey Weinstock

Mailing Address 102 Tremont Circle

City Chapel Hill State NC Zip Code 27516

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

Name of Employer BCBSNC Occupation Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 403.20

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	0	3	/	2	0	0	8

Transaction ID: SA11AI.68998

Amount of Each Receipt this Period 28.80

SUBTOTAL of Receipts This Page (optional) ► **81.38**

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 166 / 200
(check only one)

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

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

<p>A. Full Name (Last, First, Middle Initial) Jeffrey Weinstock</p> <p>Mailing Address 102 Tremont Circle</p> <p>City State Zip Code Chapel Hill NC 27516</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer BCBSNC Occupation Director</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 432.00</p>	<p>Date of Receipt 07 / 18 / 2008</p> <p>Transaction ID: SA11AI.69168</p> <p>Amount of Each Receipt this Period 28.80</p>
--	--

<p>B. Full Name (Last, First, Middle Initial) Jeffrey Weinstock</p> <p>Mailing Address 102 Tremont Circle</p> <p>City State Zip Code Chapel Hill NC 27516</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer BCBSNC Occupation Director</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 460.80</p>	<p>Date of Receipt 08 / 01 / 2008</p> <p>Transaction ID: SA11AI.69412</p> <p>Amount of Each Receipt this Period 28.80</p>
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<p>C. Full Name (Last, First, Middle Initial) Jeffrey Weinstock</p> <p>Mailing Address 102 Tremont Circle</p> <p>City State Zip Code Chapel Hill NC 27516</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer BCBSNC Occupation Director</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 489.60</p>	<p>Date of Receipt 08 / 15 / 2008</p> <p>Transaction ID: SA11AI.69585</p> <p>Amount of Each Receipt this Period 28.80</p>
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SUBTOTAL of Receipts This Page (optional)	86.40
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 167 / 200
(check only one)

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

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial) Jeffrey Weinstock		Date of Receipt MM / DD / YYYY 08 / 29 / 2008
Mailing Address 102 Tremont Circle		Transaction ID: SA11AI.69761
City Chapel Hill	State NC	Zip Code 27516
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 28.80
Name of Employer BCBSNC	Occupation Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 518.40	

B.

Full Name (Last, First, Middle Initial) Jeffrey Weinstock		Date of Receipt MM / DD / YYYY 09 / 12 / 2008
Mailing Address 102 Tremont Circle		Transaction ID: SA11AI.69937
City Chapel Hill	State NC	Zip Code 27516
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 28.80
Name of Employer BCBSNC	Occupation Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 547.20	

C.

Full Name (Last, First, Middle Initial) Jeffrey Weinstock		Date of Receipt MM / DD / YYYY 09 / 26 / 2008
Mailing Address 102 Tremont Circle		Transaction ID: SA11AI.70114
City Chapel Hill	State NC	Zip Code 27516
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 28.80
Name of Employer BCBSNC	Occupation Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 576.00	

SUBTOTAL of Receipts This Page (optional)	86.40
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 168 / 200
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Kimberly Whiteurs		Date of Receipt
	Mailing Address 3008 Cardinal Lake Dr		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 07 / 03 / 2008
	City	State	Zip Code
	Durham	NC	27704
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.69001
Name of Employer BCBSNC		Occupation Senior Business Consultant	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 15.74
		<input type="text"/> 215.16	

B.	Full Name (Last, First, Middle Initial) Kimberly Whiteurs		Date of Receipt
	Mailing Address 3008 Cardinal Lake Dr		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 07 / 18 / 2008
	City	State	Zip Code
	Durham	NC	27704
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.69171
Name of Employer BCBSNC		Occupation Senior Business Consultant	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 15.74
		<input type="text"/> 230.90	

C.	Full Name (Last, First, Middle Initial) Kimberly Whiteurs		Date of Receipt
	Mailing Address 3008 Cardinal Lake Dr		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 08 / 01 / 2008
	City	State	Zip Code
	Durham	NC	27704
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.69415
Name of Employer BCBSNC		Occupation Senior Business Consultant	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 15.74
		<input type="text"/> 246.64	

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 47.22
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 169 / 200
(check only one)

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

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Kimberly Whiteurs

Mailing Address 3008 Cardinal Lake Dr

City State Zip Code
Durham NC 27704

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

Name of Employer Occupation
BCBSNC Senior Business Consultant

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 262.38

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 1 5 / 2 0 0 8

Transaction ID: SA11AI.69588

Amount of Each Receipt this Period

15.74

B.

Full Name (Last, First, Middle Initial)
Kimberly Whiteurs

Mailing Address 3008 Cardinal Lake Dr

City State Zip Code
Durham NC 27704

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

Name of Employer Occupation
BCBSNC Senior Business Consultant

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 278.12

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 2 9 / 2 0 0 8

Transaction ID: SA11AI.69764

Amount of Each Receipt this Period

15.74

C.

Full Name (Last, First, Middle Initial)
Kimberly Whiteurs

Mailing Address 3008 Cardinal Lake Dr

City State Zip Code
Durham NC 27704

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

Name of Employer Occupation
BCBSNC Senior Business Consultant

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 293.86

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 2 / 2 0 0 8

Transaction ID: SA11AI.69940

Amount of Each Receipt this Period

15.74

SUBTOTAL of Receipts This Page (optional) ▶

47.22

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 170 / 200
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Kimberly Whiteurs		Date of Receipt
	Mailing Address 3008 Cardinal Lake Dr		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 09 / 26 / 2008
	City	State	Zip Code
	Durham	NC	27704
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.70117
Name of Employer BCBSNC		Occupation Senior Business Consultant	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 309.60	15.74

B.	Full Name (Last, First, Middle Initial) Mr. James Wilson		Date of Receipt
	Mailing Address 227 Midenhall Way		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 07 / 03 / 2008
	City	State	Zip Code
	Cary	NC	27513
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.69003
Name of Employer BCBSNC		Occupation SVP	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 2692.20	192.30

C.	Full Name (Last, First, Middle Initial) Mr. James Wilson		Date of Receipt
	Mailing Address 227 Midenhall Way		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 07 / 18 / 2008
	City	State	Zip Code
	Cary	NC	27513
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.69173
Name of Employer BCBSNC		Occupation SVP	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 2884.50	192.30

SUBTOTAL of Receipts This Page (optional)	400.34
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 171 / 200
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Mr. James Wilson		Date of Receipt
	Mailing Address 227 Midenhall Way		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	Cary	NC	27513
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.69417
Name of Employer BCBSNC		Occupation SVP	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/>
		<input type="text"/> 3076.80	<input type="text"/> 192.30

B.	Full Name (Last, First, Middle Initial) Mr. James Wilson		Date of Receipt
	Mailing Address 227 Midenhall Way		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	Cary	NC	27513
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.69590
Name of Employer BCBSNC		Occupation SVP	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/>
		<input type="text"/> 3269.10	<input type="text"/> 192.30

C.	Full Name (Last, First, Middle Initial) Mr. James Wilson		Date of Receipt
	Mailing Address 227 Midenhall Way		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	Cary	NC	27513
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.69766
Name of Employer BCBSNC		Occupation SVP	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/>
		<input type="text"/> 3461.40	<input type="text"/> 192.30

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 576.90
TOTAL This Period (last page this line number only)	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 172 / 200
	<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 North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Mr. James Wilson	Date of Receipt MM / DD / YYYY 09 / 12 / 2008
	Mailing Address 227 Midenhall Way	Transaction ID: SA11AI.69942
	City State Zip Code Cary NC 27513	Amount of Each Receipt this Period 192.30
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation SVP Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 3653.70	

B.	Full Name (Last, First, Middle Initial) Mr. James Wilson	Date of Receipt MM / DD / YYYY 09 / 26 / 2008
	Mailing Address 227 Midenhall Way	Transaction ID: SA11AI.70119
	City State Zip Code Cary NC 27513	Amount of Each Receipt this Period 192.30
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation SVP Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 3846.00	

C.	Full Name (Last, First, Middle Initial) Mr. Christopher Woodfin	Date of Receipt MM / DD / YYYY 07 / 03 / 2008
	Mailing Address 100 Palmyra Place	Transaction ID: SA11AI.69004
	City State Zip Code Chapel Hill NC 27514	Amount of Each Receipt this Period 88.35
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation VP Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1210.75	

SUBTOTAL of Receipts This Page (optional)	472.95
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 173 / 200
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Mr. Christopher Woodfin		Date of Receipt	
	Mailing Address 100 Palmyra Place		M M / D D / Y Y Y Y 07 / 18 / 2008	
	City	State	Zip Code	Transaction ID: SA11AI.69174
	Chapel Hill	NC	27514	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		88.35	
Name of Employer BCBSNC		Occupation VP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		1299.10		

B.	Full Name (Last, First, Middle Initial) Mr. Christopher Woodfin		Date of Receipt	
	Mailing Address 100 Palmyra Place		M M / D D / Y Y Y Y 08 / 01 / 2008	
	City	State	Zip Code	Transaction ID: SA11AI.69418
	Chapel Hill	NC	27514	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		88.35	
Name of Employer BCBSNC		Occupation VP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		1387.45		

C.	Full Name (Last, First, Middle Initial) Mr. Christopher Woodfin		Date of Receipt	
	Mailing Address 100 Palmyra Place		M M / D D / Y Y Y Y 08 / 15 / 2008	
	City	State	Zip Code	Transaction ID: SA11AI.69591
	Chapel Hill	NC	27514	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		88.35	
Name of Employer BCBSNC		Occupation VP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		1475.80		

SUBTOTAL of Receipts This Page (optional)	▶	265.05
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 174 / 200
(check only one)

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

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 North Carolina Employee Political Action Committee

A. Full Name (Last, First, Middle Initial)
Mr. Christopher Woodfin

Mailing Address 100 Palmyra Place

City State Zip Code
Chapel Hill NC 27514

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

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1564.15

Date of Receipt
M M / D D / Y Y Y Y
0 8 / 2 9 / 2 0 0 8

Transaction ID: SA11AI.69767

Amount of Each Receipt this Period
88.35

B. Full Name (Last, First, Middle Initial)
Mr. Christopher Woodfin

Mailing Address 100 Palmyra Place

City State Zip Code
Chapel Hill NC 27514

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

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1652.50

Date of Receipt
M M / D D / Y Y Y Y
0 9 / 1 2 / 2 0 0 8

Transaction ID: SA11AI.69943

Amount of Each Receipt this Period
88.35

C. Full Name (Last, First, Middle Initial)
Mr. Christopher Woodfin

Mailing Address 100 Palmyra Place

City State Zip Code
Chapel Hill NC 27514

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

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1740.85

Date of Receipt
M M / D D / Y Y Y Y
0 9 / 2 6 / 2 0 0 8

Transaction ID: SA11AI.70121

Amount of Each Receipt this Period
88.35

SUBTOTAL of Receipts This Page (optional) ► **265.05**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 175 / 200
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Kenneth Wright		Date of Receipt
	Mailing Address 618 S. Wingate Dr.		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 07 / 03 / 2008
	City	State	Zip Code
	Wake Forest	NC	27587
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.69005
Name of Employer BCBSNC		Occupation Director	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 38.00
		<input type="text"/> 521.20	

B.	Full Name (Last, First, Middle Initial) Kenneth Wright		Date of Receipt
	Mailing Address 618 S. Wingate Dr.		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 07 / 18 / 2008
	City	State	Zip Code
	Wake Forest	NC	27587
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.69175
Name of Employer BCBSNC		Occupation Director	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 38.00
		<input type="text"/> 559.20	

C.	Full Name (Last, First, Middle Initial) Kenneth Wright		Date of Receipt
	Mailing Address 618 S. Wingate Dr.		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 08 / 01 / 2008
	City	State	Zip Code
	Wake Forest	NC	27587
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.69419
Name of Employer BCBSNC		Occupation Director	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 38.00
		<input type="text"/> 597.20	

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 114.00
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 176 / 200
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. Full Name (Last, First, Middle Initial)
Kenneth Wright
Mailing Address 618 S. Wingate Dr.
City Wake Forest State NC Zip Code 27587
FEC ID number of contributing federal political committee. **C**
Name of Employer BCBSNC Occupation Director
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 635.20
Date of Receipt 08 / 15 / 2008
Transaction ID: SA11AI.69592
Amount of Each Receipt this Period 38.00

B. Full Name (Last, First, Middle Initial)
Kenneth Wright
Mailing Address 618 S. Wingate Dr.
City Wake Forest State NC Zip Code 27587
FEC ID number of contributing federal political committee. **C**
Name of Employer BCBSNC Occupation Director
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 673.20
Date of Receipt 08 / 29 / 2008
Transaction ID: SA11AI.69768
Amount of Each Receipt this Period 38.00

C. Full Name (Last, First, Middle Initial)
Kenneth Wright
Mailing Address 618 S. Wingate Dr.
City Wake Forest State NC Zip Code 27587
FEC ID number of contributing federal political committee. **C**
Name of Employer BCBSNC Occupation Director
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 711.20
Date of Receipt 09 / 12 / 2008
Transaction ID: SA11AI.69944
Amount of Each Receipt this Period 38.00

SUBTOTAL of Receipts This Page (optional) ► 114.00
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 177 / 200
(check only one)

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

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Kenneth Wright

Mailing Address 618 S. Wingate Dr.

City State Zip Code
Wake Forest NC 27587

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

Name of Employer Occupation
BCBSNC Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
749.20

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 26 / 2008

Transaction ID: SA11AI.70122

Amount of Each Receipt this Period
38.00

SUBTOTAL of Receipts This Page (optional)	▶	38.00
TOTAL This Period (last page this line number only)	▶	31712.13

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 178 / 200

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

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NAME OF COMMITTEE (In Full)

Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. Full Name (Last, First, Middle Initial) Hon. Richard M. Burr <hr/> Mailing Address P.O. Box 5928 <hr/> City Winston-Salem State NC Zip Code 27113 <hr/> Purpose of Disbursement contribution Candidate Name Hon. Richard M. Burr Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 05 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.69191 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 5 / 2 0 0 8
	Amount of Each Disbursement this Period 1000.00
B. Full Name (Last, First, Middle Initial) G.K. Butterfield <hr/> Mailing Address <hr/> City State Zip Code <hr/> Purpose of Disbursement contribution Candidate Name G.K. Butterfield Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 01 Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.69188 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 5 / 2 0 0 8
	Amount of Each Disbursement this Period 1000.00
C. Full Name (Last, First, Middle Initial) Hon. Bob Etheridge <hr/> Mailing Address P.O. Box 28001 <hr/> City Raleigh State NC Zip Code 27611 <hr/> Purpose of Disbursement contribution Candidate Name Hon. Bob Etheridge Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 02 Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.69183 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 3 0 / 2 0 0 8
	Amount of Each Disbursement this Period 3000.00

SUBTOTAL of Disbursements This Page (optional) ▶

5000.00

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)

PAGE 179 / 200

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

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NAME OF COMMITTEE (In Full)

Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Hon. Robin Hayes	Transaction ID: SB23.69193 Date of Disbursement 09 / 05 / 2008
	Mailing Address 137 Union Street South	Amount of Each Disbursement this Period 2000.00
	City Concord State NC Zip Code 28025	
	Purpose of Disbursement contribution Candidate Name Hon. Robin Hayes Category/Type	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 08 Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
B.	Full Name (Last, First, Middle Initial) Hon. Mike McIntyre	Transaction ID: SB23.69190 Date of Disbursement 09 / 05 / 2008
	Mailing Address 218 Federal Building	Amount of Each Disbursement this Period 1000.00
	City Fayetteville State NC Zip Code 28301	
	Purpose of Disbursement contribution Candidate Name Hon. Mike McIntyre Category/Type	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 07 Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
C.	Full Name (Last, First, Middle Initial) Sen. Brad Miller	Transaction ID: SB23.69194 Date of Disbursement 09 / 05 / 2008
	Mailing Address 200-301 Calibre Chase Dr.	Amount of Each Disbursement this Period 1500.00
	City Raleigh State NC Zip Code 27609	
	Purpose of Disbursement contribution Candidate Name Sen. Brad Miller Category/Type	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 13 Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶

4500.00

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)

PAGE 180 / 200

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

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NAME OF COMMITTEE (In Full)

Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Hon. Sue Myrick	Transaction ID: SB23.69185 Date of Disbursement 08 / 18 / 2008
	Mailing Address 9169 Bonnie Briar Cir.	Amount of Each Disbursement this Period 2500.00
	City Charlotte State NC Zip Code 28277	
	Purpose of Disbursement contribution Candidate Name Hon. Sue Myrick Category/Type	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 09 Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
B.	Full Name (Last, First, Middle Initial) David Price	Transaction ID: SB23.69187 Date of Disbursement 09 / 05 / 2008
	Mailing Address P.O. Box 1986	Amount of Each Disbursement this Period 3000.00
	City Raleigh State NC Zip Code 27602	
	Purpose of Disbursement contribution Candidate Name David Price Category/Type	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 04 Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
C.	Full Name (Last, First, Middle Initial) Heath Shuler	Transaction ID: SB23.69192 Date of Disbursement 09 / 05 / 2008
	Mailing Address	Amount of Each Disbursement this Period 1000.00
	City State Zip Code	
	Purpose of Disbursement contribution Candidate Name Heath Shuler Category/Type	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 11 Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ►

6500.00

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)

PAGE 181 / 200

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

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NAME OF COMMITTEE (In Full)

Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Mel Watt

Transaction ID: SB23.69189

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	5		2	0	0	8

Mailing Address PO Box 36831

City State Zip Code
Charlotte NC 28236

Amount of Each Disbursement this Period

1000.00

Purpose of Disbursement
contribution

--

Candidate Name
Mr. Mel Watt

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: NC District: 12

SUBTOTAL of Disbursements This Page (optional) ►

1000.00

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

17000.00

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)

Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. Full Name (Last, First, Middle Initial) Lucy Allen <hr/> Mailing Address 312 N. Main St <hr/> City Louisburg State NC Zip Code 27549 <hr/> Purpose of Disbursement contribution Candidate Name Lucy Allen Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 49 Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB29.69226 Date of Disbursement M M / D D / Y Y Y Y 09 / 17 / 2008
	Amount of Each Disbursement this Period 750.00
B. Full Name (Last, First, Middle Initial) Mr. Tom Apodaca <hr/> Mailing Address 214 N. King St <hr/> City Hendersonville State NC Zip Code 28792 <hr/> Purpose of Disbursement contribution Candidate Name Mr. Tom Apodaca Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 48 Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB29.70143 Date of Disbursement M M / D D / Y Y Y Y 09 / 17 / 2008
	Amount of Each Disbursement this Period 2500.00
C. Full Name (Last, First, Middle Initial) Marilyn Avila <hr/> Mailing Address 11312 Derby Ln. <hr/> City Raleigh State NC Zip Code 27613 <hr/> Purpose of Disbursement contribution Candidate Name Marilyn Avila Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB29.69221 Date of Disbursement M M / D D / Y Y Y Y 09 / 17 / 2008
	Amount of Each Disbursement this Period 500.00

SUBTOTAL of Disbursements This Page (optional) ▶

3750.00

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)

PAGE 183 / 200

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

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NAME OF COMMITTEE (In Full)

Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Sen. Marc Basnight	Transaction ID: SB29.69199 Date of Disbursement 09 / 11 / 2008
	Mailing Address PO Box 302	Amount of Each Disbursement this Period 4000.00
	City Manteo State NC Zip Code 28403	Category/ Type
	Purpose of Disbursement contribution Candidate Name Sen. Marc Basnight	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
B.	Full Name (Last, First, Middle Initial) BCBSA BluePac	Transaction ID: SB29.69176 Date of Disbursement 07 / 01 / 2008
	Mailing Address 1310 G. Street N.W. 12th Floor	Amount of Each Disbursement this Period 3500.00
	City Washington State DC Zip Code 20005	Category/ Type
	Purpose of Disbursement contribution Candidate Name BCBSA BluePac	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
C.	Full Name (Last, First, Middle Initial) Phil Berger	Transaction ID: SB29.70137 Date of Disbursement 09 / 17 / 2008
	Mailing Address 1809 Indian Trail	Amount of Each Disbursement this Period 2500.00
	City Eden State NC Zip Code 27288	Category/ Type
	Purpose of Disbursement contribution Candidate Name Phil Berger	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ►

10000.00

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)

PAGE 184 / 200

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

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NAME OF COMMITTEE (In Full)

Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. Full Name (Last, First, Middle Initial) Rep. Daniel Blue, Jr. <hr/> Mailing Address P.O. Box 1730 <hr/> City Raleigh State NC Zip Code 27602 <hr/> Purpose of Disbursement contribution Candidate Name Rep. Daniel Blue, Jr. <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB29.69215 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 7 / 2 0 0 8
	Amount of Each Disbursement this Period 1500.00
	Category/ Type
	Category/ Type
B. Full Name (Last, First, Middle Initial) Van Braxton <hr/> Mailing Address <hr/> City State Zip Code <hr/> Purpose of Disbursement contribution Candidate Name Van Braxton <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB29.69206 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 7 / 2 0 0 8
	Amount of Each Disbursement this Period 750.00
	Category/ Type
	Category/ Type
C. Full Name (Last, First, Middle Initial) Becky Carney <hr/> Mailing Address <hr/> City State Zip Code <hr/> Purpose of Disbursement contribution Candidate Name Becky Carney <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB29.70123 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 7 / 2 0 0 8
	Amount of Each Disbursement this Period 750.00
	Category/ Type
	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶

3000.00

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)

PAGE 185 / 200

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

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NAME OF COMMITTEE (In Full)

Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Lorene Coates <hr/> Mailing Address 1345 Gheen Road <hr/> City Salisbury State NC Zip Code 27147 <hr/> Purpose of Disbursement contribution Candidate Name Lorene Coates Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB29.69231 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 7 / 2 0 0 8 <hr/> Amount of Each Disbursement this Period 750.00
B.	Full Name (Last, First, Middle Initial) Sen. Roy Cooper <hr/> Mailing Address P.O. Box 4538 <hr/> City Rocky Mount State NC Zip Code 27803 <hr/> Purpose of Disbursement contribution Candidate Name Sen. Roy Cooper Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB29.70133 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 7 / 2 0 0 8 <hr/> Amount of Each Disbursement this Period 2000.00
C.	Full Name (Last, First, Middle Initial) Sen. Walter Dalton <hr/> Mailing Address 153 West Main St Ste 116 <hr/> City Forest City State NC Zip Code 28043 <hr/> Purpose of Disbursement contribution Candidate Name Sen. Walter Dalton Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB29.70132 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 7 / 2 0 0 8 <hr/> Amount of Each Disbursement this Period 4000.00

SUBTOTAL of Disbursements This Page (optional) ▶

6750.00

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)

PAGE 186 / 200

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

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Leo Daughtry			Transaction ID: SB29.69213 Date of Disbursement		
	Mailing Address 407 N. Third St			09 / 17 / 2008		
	City Smithfield	State NC	Zip Code 27577	Amount of Each Disbursement this Period		
	Purpose of Disbursement contribution			750.00		
Candidate Name Leo Daughtry			Category/Type			
Office Sought: <input type="checkbox"/> House	Disbursement For: 2008					
<input type="checkbox"/> Senate	<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General				
<input type="checkbox"/> President	<input type="checkbox"/> Other (specify) ▼					
State:	District:					
B.	Full Name (Last, First, Middle Initial) Margaret Dickson			Transaction ID: SB29.69223 Date of Disbursement		
	Mailing Address 115 Dobbin Avenue			09 / 17 / 2008		
	City Fayetteville	State NC	Zip Code 28103	Amount of Each Disbursement this Period		
	Purpose of Disbursement contribution			750.00		
Candidate Name Sen. Walter Dalton			Category/Type			
Office Sought: <input type="checkbox"/> House	Disbursement For: 2008					
<input type="checkbox"/> Senate	<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General				
<input type="checkbox"/> President	<input type="checkbox"/> Other (specify) ▼					
State:	District:					
C.	Full Name (Last, First, Middle Initial) Rep. Jerry Dockham			Transaction ID: SB29.69233 Date of Disbursement		
	Mailing Address P.O. Box 265			09 / 17 / 2008		
	City Denton	State NC	Zip Code 27239	Amount of Each Disbursement this Period		
	Purpose of Disbursement contribution			750.00		
Candidate Name Rep. Jerry Dockham			Category/Type			
Office Sought: <input type="checkbox"/> House	Disbursement For: 2008					
<input type="checkbox"/> Senate	<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General				
<input type="checkbox"/> President	<input type="checkbox"/> Other (specify) ▼					
State:	District:					

SUBTOTAL of Disbursements This Page (optional) ►

2250.00

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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(check only one)

PAGE 187 / 200

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

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NAME OF COMMITTEE (In Full)

Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. Full Name (Last, First, Middle Initial) Mr. Nelson Dollar <hr/> Mailing Address PO Box 1369 <hr/> City Cary State NC Zip Code 27512 <hr/> Purpose of Disbursement contribution Candidate Name Mr. Nelson Dollar Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 36 Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB29.69216 Date of Disbursement M M / D D / Y Y Y Y 09 / 17 / 2008
	Amount of Each Disbursement this Period 1000.00
	Category/ Type
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Bob England <hr/> Mailing Address PO Box 523 <hr/> City Forest City State NC Zip Code 28043 <hr/> Purpose of Disbursement contribution Candidate Name Bob England Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB29.70129 Date of Disbursement M M / D D / Y Y Y Y 09 / 17 / 2008
	Amount of Each Disbursement this Period 750.00
	Category/ Type
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Sen. Linda Garrou <hr/> Mailing Address P.O. Box 11843 <hr/> City Winston-Salem State NC Zip Code 27116 <hr/> Purpose of Disbursement contribution Candidate Name Sen. Linda Garrou Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB29.70151 Date of Disbursement M M / D D / Y Y Y Y 09 / 17 / 2008
	Amount of Each Disbursement this Period 1000.00
	Category/ Type
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

2750.00

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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PAGE 188 / 200

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

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NAME OF COMMITTEE (In Full)

Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Mitch Gillespie <hr/> Mailing Address 185 Cross Creek North Ridge Drive <hr/> City marion State NY Zip Code 28752 <hr/> Purpose of Disbursement contribution Candidate Name Mitch Gillespie Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 85 Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB29.69234 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 7 / 2 0 0 8	Amount of Each Disbursement this Period 750.00
B.	Full Name (Last, First, Middle Initial) Steve Goss <hr/> Mailing Address 166 Morningside Dr. <hr/> City Boone State NC Zip Code 28607 <hr/> Purpose of Disbursement contribution Candidate Name Steve Goss Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 45 Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB29.70140 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 7 / 2 0 0 8	Amount of Each Disbursement this Period 500.00
C.	Full Name (Last, First, Middle Initial) Joe Hackney <hr/> Mailing Address <hr/> City State Zip Code <hr/> Purpose of Disbursement contribution Candidate Name Joe Hackney Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 54 Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB29.69202 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 1 / 2 0 0 8	Amount of Each Disbursement this Period 4000.00

SUBTOTAL of Disbursements This Page (optional) ▶

5250.00

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)

PAGE 189 / 200

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

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NAME OF COMMITTEE (In Full)

Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Jim Harrell Mailing Address PO Box 626 City Elkin State NC Zip Code 28621 Purpose of Disbursement contribution Candidate Name Jim Harrell Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB29.69237 Date of Disbursement 09 / 17 / 2008 Amount of Each Disbursement this Period 1000.00
B.	Full Name (Last, First, Middle Initial) Ty Harrell Mailing Address P.O Box 27376 City Raleigh State NC Zip Code 27611 Purpose of Disbursement contribution Candidate Name Ty Harrell Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB29.69219 Date of Disbursement 09 / 17 / 2008 Amount of Each Disbursement this Period 750.00
C.	Full Name (Last, First, Middle Initial) Hugh Holliman Mailing Address 102 Warrior Way City Lexington State NC Zip Code 27295 Purpose of Disbursement contribution Candidate Name Hugh Holliman Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB29.69203 Date of Disbursement 09 / 11 / 2008 Amount of Each Disbursement this Period 4000.00

SUBTOTAL of Disbursements This Page (optional) ▶

5750.00

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)

PAGE 190 / 200

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

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NAME OF COMMITTEE (In Full)

Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Julia Howard Mailing Address 203 Magnolia Avenue City Mocksville State NC Zip Code 27028 Purpose of Disbursement contribution Candidate Name Julia Howard Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB29.69232 Date of Disbursement 09 / 17 / 2008 Amount of Each Disbursement this Period 500.00
B.	Full Name (Last, First, Middle Initial) Sen. David Hoyle Mailing Address P.O. Box 2494 City Gastonia State NC Zip Code 28053 Purpose of Disbursement contribution Candidate Name Sen. David Hoyle Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB29.69184 Date of Disbursement 08 / 05 / 2008 Amount of Each Disbursement this Period 4000.00
C.	Full Name (Last, First, Middle Initial) Neal Hunt Mailing Address 2608 Sherborne Place City Raleigh State NC Zip Code 27612 Purpose of Disbursement contribution Candidate Name Hunt, Neal Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB29.70135 Date of Disbursement 09 / 17 / 2008 Amount of Each Disbursement this Period 750.00

SUBTOTAL of Disbursements This Page (optional) ▶

5250.00

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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 191 / 200

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

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NAME OF COMMITTEE (In Full)

Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. Full Name (Last, First, Middle Initial) Mr. Jimmy Love <hr/> Mailing Address PO Box 309 <hr/> City Sanford State NC Zip Code 27331 <hr/> Purpose of Disbursement contribution Candidate Name Mr. Jimmy Love Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 51 Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB29.69227 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 7 / 2 0 0 8
	Amount of Each Disbursement this Period 750.00
	Category/ Type
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Vernon Malone <hr/> Mailing Address 1320 Yakimas Road <hr/> City Raleigh State NC Zip Code 27603 <hr/> Purpose of Disbursement contribution Candidate Name Vernon Malone Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB29.70144 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 7 / 2 0 0 8
	Amount of Each Disbursement this Period 1000.00
	Category/ Type
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Rep. Daniel McComas <hr/> Mailing Address P.O. Box 2274 <hr/> City Wilmington State NC Zip Code 28402 <hr/> Purpose of Disbursement contribution Candidate Name Rep. Daniel McComas Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB29.69211 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 7 / 2 0 0 8
	Amount of Each Disbursement this Period 500.00
	Category/ Type
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

2250.00

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)

PAGE 192 / 200

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

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NAME OF COMMITTEE (In Full)

Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Pat McElraft <hr/> Mailing Address PO Box 4477 <hr/> City Emerald Isle State NC Zip Code 28594 <hr/> Purpose of Disbursement contribution Candidate Name Pat McElraft Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB29.69207 Date of Disbursement 09 / 17 / 2008 <hr/> Amount of Each Disbursement this Period 500.00
B.	Full Name (Last, First, Middle Initial) Rep. Marian McLawhorn <hr/> Mailing Address 4200 Academic Drive <hr/> City New Bern State NC Zip Code 28562 <hr/> Purpose of Disbursement contribution Candidate Name Rep. Marian McLawhorn Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB29.69204 Date of Disbursement 09 / 17 / 2008 <hr/> Amount of Each Disbursement this Period 750.00
C.	Full Name (Last, First, Middle Initial) NC House Democratic Committee <hr/> Mailing Address <hr/> City State Zip Code <hr/> Purpose of Disbursement contribution Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB29.69180 Date of Disbursement 07 / 25 / 2008 <hr/> Amount of Each Disbursement this Period 1000.00

SUBTOTAL of Disbursements This Page (optional) ▶

2250.00

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)

PAGE 193 / 200

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

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NAME OF COMMITTEE (In Full)

Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) NC House Republican Committee <hr/> Mailing Address <hr/> City State Zip Code <hr/> Purpose of Disbursement contribution Candidate Name NC House Republican Committee <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB29.69182 Date of Disbursement 07 / 25 / 2008 <hr/> Amount of Each Disbursement this Period 1000.00
B.	Full Name (Last, First, Middle Initial) NC Republican Senate Committee <hr/> Mailing Address 1506 Hillsborough Street <hr/> City State Zip Code Raleigh NC 27605 <hr/> Purpose of Disbursement contribution Candidate Name NC Senate Committee <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB29.69177 Date of Disbursement 07 / 25 / 2008 <hr/> Amount of Each Disbursement this Period 1000.00
C.	Full Name (Last, First, Middle Initial) NC Senate Committee <hr/> Mailing Address <hr/> City State Zip Code <hr/> Purpose of Disbursement contribution Candidate Name Senate democratic Caucus <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB29.69181 Date of Disbursement 07 / 25 / 2008 <hr/> Amount of Each Disbursement this Period 1000.00

SUBTOTAL of Disbursements This Page (optional) ▶

3000.00

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"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. Full Name (Last, First, Middle Initial) paul Stam <hr/> Mailing Address 714 Hunter St <hr/> City Apex State NC Zip Code 27502 <hr/> Purpose of Disbursement contribution Candidate Name paul Stam Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 37 Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB29.70131 Date of Disbursement 09 / 17 / 2008
	Amount of Each Disbursement this Period 1000.00
	Category/ Type
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Edgar Starnes <hr/> Mailing Address 5852 New Farm Road <hr/> City Granite Falls State NC Zip Code 28630 <hr/> Purpose of Disbursement contribution Candidate Name Starnes, Edgar Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB29.69235 Date of Disbursement 09 / 17 / 2008
	Amount of Each Disbursement this Period 750.00
	Category/ Type
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Fred Steen <hr/> Mailing Address 317 Daybrook Drive <hr/> City Landis State NC Zip Code 28088 <hr/> Purpose of Disbursement contribution Candidate Name Fred Steen Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB29.69230 Date of Disbursement 09 / 17 / 2008
	Amount of Each Disbursement this Period 750.00
	Category/ Type
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

2500.00

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SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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FOR LINE NUMBER: (check only one)

PAGE 197 / 200

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

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NAME OF COMMITTEE (In Full)

Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Josh Stein <hr/> Mailing Address <hr/> City State Zip Code <hr/> Purpose of Disbursement contribution Candidate Name Josh Stein <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB29.70148 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 7 / 2 0 0 8 <hr/> Amount of Each Disbursement this Period 600.00
B.	Full Name (Last, First, Middle Initial) Bonner Stiller <hr/> Mailing Address 4908 E. Yacht Drive <hr/> City State Zip Code Oak Island NC 28465 <hr/> Purpose of Disbursement contribution Candidate Name Bonner Stiller <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB29.69210 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 7 / 2 0 0 8 <hr/> Amount of Each Disbursement this Period 750.00
C.	Full Name (Last, First, Middle Initial) A.B. Swindell <hr/> Mailing Address PO Box 7728 <hr/> City State Zip Code Rocky Mount NC 27804 <hr/> Purpose of Disbursement contribution Candidate Name A.B. Swindell <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB29.70147 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 7 / 2 0 0 8 <hr/> Amount of Each Disbursement this Period 1000.00

SUBTOTAL of Disbursements This Page (optional) ▶

2350.00

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

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FOR LINE NUMBER:
(check only one)

PAGE 198 / 200

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

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NAME OF COMMITTEE (In Full)

Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Thom Tillis <hr/> Mailing Address 16116 North Point Rd <hr/> City State Zip Code Huntersville NC 28078 <hr/> Purpose of Disbursement contribution Candidate Name Thom Tillis <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 98 Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB29.69238 Date of Disbursement 09 / 17 / 2008	Amount of Each Disbursement this Period 500.00
B.	Full Name (Last, First, Middle Initial) Jerry Tillman <hr/> Mailing Address 6246 Weant Road <hr/> City State Zip Code Archdale NC 27263 <hr/> Purpose of Disbursement contribution Candidate Name Jerry Tillman <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB29.70138 Date of Disbursement 09 / 17 / 2008	Amount of Each Disbursement this Period 500.00
C.	Full Name (Last, First, Middle Initial) Joe Tolson <hr/> Mailing Address P.O. Box J <hr/> City State Zip Code Pinetops NC 27864 <hr/> Purpose of Disbursement contribution Candidate Name Tolson, Joe <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB29.69212 Date of Disbursement 09 / 17 / 2008	Amount of Each Disbursement this Period 750.00

SUBTOTAL of Disbursements This Page (optional) ▶

1750.00

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SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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FOR LINE NUMBER:
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PAGE 199 / 200

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

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NAME OF COMMITTEE (In Full)

Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Donald Ray Vaughn <hr/> Mailing Address <hr/> City State Zip Code <hr/> Purpose of Disbursement contribution Candidate Name Donald Ray Vaughn <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB29.70136 Date of Disbursement 09 / 17 / 2008	Amount of Each Disbursement this Period 750.00
B.	Full Name (Last, First, Middle Initial) Ray Warren <hr/> Mailing Address <hr/> City State Zip Code <hr/> Purpose of Disbursement contribution Candidate Name Ray Warren <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB29.69236 Date of Disbursement 09 / 17 / 2008	Amount of Each Disbursement this Period 1000.00
C.	Full Name (Last, First, Middle Initial) Mr. Winkie Wilkins <hr/> Mailing Address 210 Fair Oaks Dr <hr/> City State Zip Code Roxboro NC 27574 <hr/> Purpose of Disbursement contribution Candidate Name Mr. Winkie Wilkins <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 55 Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB29.69228 Date of Disbursement 09 / 17 / 2008	Amount of Each Disbursement this Period 500.00

SUBTOTAL of Disbursements This Page (optional) ▶

2250.00

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

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PAGE 200 / 200

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

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NAME OF COMMITTEE (In Full)

Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Arthur Williams <hr/> Mailing Address <hr/> City State Zip Code <hr/> Purpose of Disbursement contribution Candidate Name Arthur Williams <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB29.69198 Date of Disbursement 09 / 08 / 2008 <hr/> Amount of Each Disbursement this Period 500.00
B.	Full Name (Last, First, Middle Initial) Michael Wray <hr/> Mailing Address P.O. Box 904 <hr/> City State Zip Code Gastonia NC 27832 <hr/> Purpose of Disbursement contribution Candidate Name Wray, Michael <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB29.69214 Date of Disbursement 09 / 17 / 2008 <hr/> Amount of Each Disbursement this Period 500.00
C.	Full Name (Last, First, Middle Initial) Doug Yongue <hr/> Mailing Address 604 Prince St. <hr/> City State Zip Code Laurinburg NC 28352 <hr/> Purpose of Disbursement contribution Candidate Name Doug Yongue <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 46 Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB29.69225 Date of Disbursement 09 / 17 / 2008 <hr/> Amount of Each Disbursement this Period 500.00

SUBTOTAL of Disbursements This Page (optional) ▶

1500.00

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

70700.00